



CONTAINS NO CBI
UNITED STATES ENVIRONMENTAL PROTECTION AGENCY
WASHINGTON, D.C. 20460

90-890000588

JUL 28 1989

RECEIVED

AUG 0 1989

Canandaigua Plastics Div.
Personnel Department

Ms. Tracy Potter
Canandigua Plastics Division
Voplex Corporation
203 North Street
Canandigua, NY 14424

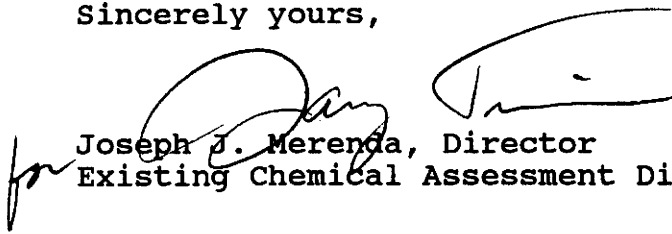
Dear Ms. Potter:

This is in reply to your letter of June 30, 1989, in which you requested an extension of the reporting deadline for the Comprehensive Assessment Information Rule (CAIR) for TDI.

In response to requests from certain industry trade associations, EPA granted a 30-day extension for all CAIR notification and reporting deadlines (54 FR 6918, February 15, 1989). Accordingly, the deadline for submission of a reporting form by manufacturers, importers, and processors was extended to June 7, 1989, and reporting by persons who process a CAIR listed substance under a trade name was extended to July 6, 1989.

EPA has evaluated your extension request and has decided to grant Voplex Corporation an additional thirty days. Accordingly, your reporting deadline will be August 4, 1989. No further extensions will be granted.

Sincerely yours,


Joseph J. Merenda, Director
Existing Chemical Assessment Division

cc: Mike Wood
Fred Stiehl
Frank Caesar
Doug Sellers

CONTAINS NO CBI



Form Approved
OMB No. 2010-0019
Approval Expires 12-31-89



0006114590

90-890000588

UNITED STATES ENVIRONMENTAL PROTECTION AGENCY
Comprehensive Assessment Information Rule
REPORTING FORM

When completed, send this form to:

Document Processing Center
Office of Toxic Substances, TS-790
U.S. Environmental Protection Agency
401 M Street, SW
Washington, DC 20460
Attention: CAIR Reporting Office

For Agency Use Only:

Date of Receipt: _____

Document
Control Number: _____

Docket Number: _____

SECTION 1 GENERAL MANUFACTURER, IMPORTER, AND PROCESSOR INFORMATION

PART A GENERAL REPORTING INFORMATION

✓ 1.01 This Comprehensive Assessment Information Rule (CAIR) Reporting Form has been completed in response to the Federal Register Notice of..... [1][2] [2][2] [8][8]
CBI mo. day year

☐ a. If a Chemical Abstracts Service Number (CAS No.) is provided in the Federal Register, list the CAS No. [0][2][6][4][7][1]-[6][2]-[5]

b. If a chemical substance CAS No. is not provided in the Federal Register, list either (i) the chemical name, (ii) the mixture name, or (iii) the trade name of the chemical substance as provided in the Federal Register.
N/A

(i) Chemical name as listed in the rule _____

(ii) Name of mixture as listed in the rule _____

(iii) Trade name as listed in the rule _____

c. If a chemical category is provided in the Federal Register, report the name of the category as listed in the rule, the chemical substance CAS No. you are reporting on which falls under the listed category, and the chemical name of the substance you are reporting on which falls under the listed category.
N/A

Name of category as listed in the rule _____

CAS No. of chemical substance [][][][][][]-[][]-[]

Name of chemical substance _____

✓ 1.02 Identify your reporting status under CAIR by circling the appropriate response(s).

CBI Manufacturer 1

☐ Importer 2

☒ Processor 3

X/P manufacturer reporting for customer who is a processor 4

X/P processor reporting for customer who is a processor 5

☐ Mark (X) this box if you attach a continuation sheet.

✓ 1.03 Does the substance you are reporting on have an "x/p" designation associated with it in the above-listed Federal Register Notice?

CBI

Yes ☒ Go to question 1.04

☐

No ☐ Go to question 1.05

✓ 1.04 a. Do you manufacture, import, or process the listed substance and distribute it under a trade name(s) different than that listed in the Federal Register Notice? Circle the appropriate response.

CBI

Yes 1

☐

☒ No 2

b. Check the appropriate box below:

☐ You have chosen to notify your customers of their reporting obligations

Provide the trade name(s)

☐ You have chosen to report for your customers

☐ You have submitted the trade name(s) to EPA one day after the effective date of the rule in the Federal Register Notice under which you are reporting.

✓ 1.05 If you buy a trade name product and are reporting because you were notified of your reporting requirements by your trade name supplier, provide that trade name.

CBI

Trade name PXI 4744-63 Isocyanate, PXO 68-12 Isocyanate

☐

Is the trade name product a mixture? Circle the appropriate response.

Yes 1

☒ No 2

✓ 1.06 Certification -- The person who is responsible for the completion of this form must sign the certification statement below:

CBI

"I hereby certify that, to the best of my knowledge and belief, all information entered on this form is complete and accurate."

☐

Tracy A. Potter

NAME

Tracy A. Potter

SIGNATURE

8-4-89

DATE SIGNED

Safety Coordinator

TITLE

(716)

394 - 3680

TELEPHONE NO.

☐ Mark (X) this box if you attach a continuation sheet.

- ✓ 1.07 Exemptions From Reporting -- If you have provided EPA or another Federal agency with the required information on a CAIR Reporting Form for the listed substance within the past 3 years, and this information is current, accurate, and complete for the time period specified in the rule, then sign the certification below. You are required to complete section 1 of this CAIR form and provide any information now required but not previously submitted. Provide a copy of any previous submissions along with your Section 1 submission.

"I hereby certify that, to the best of my knowledge and belief, all required information which I have not included in this CAIR Reporting Form has been submitted to EPA within the past 3 years and is current, accurate, and complete for the time period specified in the rule."

N/A

| | | |
|----------------|--------------------------------|---|
| _____ NAME | _____ SIGNATURE | _____ DATE SIGNED |
| _____ TITLE | (_____) _____ TELEPHONE NO. | _____ DATE OF PREVIOUS SUBMISSION |

- ✓ 1.08 CBI Certification -- If you have asserted any CBI claims in this report you must certify that the following statements truthfully and accurately apply to all of those confidentiality claims which you have asserted.

CBI
[] "My company has taken measures to protect the confidentiality of the information, and it will continue to take these measures; the information is not, and has not been, reasonably ascertainable by other persons (other than government bodies) by using legitimate means (other than discovery based on a showing of special need in a judicial or quasi-judicial proceeding) without my company's consent; the information is not publicly available elsewhere; and disclosure of the information would cause substantial harm to my company's competitive position."

N/A

| | | |
|----------------|--------------------------------|----------------------|
| _____ NAME | _____ SIGNATURE | _____ DATE SIGNED |
| _____ TITLE | (_____) _____ TELEPHONE NO. | |

[] Mark (X) this box if you attach a continuation sheet.

✓

SAME AS COMPANY HEADQUARTERS SEE 1.10

[illegible][illegible][illegible]

--
State Zip

Dun & Bradstreet Number[]-[]-[]

✓

CBI Name [T] [R] [A] [C] [Y] [] [P] [O] [T] [T] [E] [R] [] [] [] [] [] [] [] [] [] [] []

[illegible]

Address [2] [0] [3] [_] [N] [O] [R] [T] [H] [_] [S] [T] [R] [E] [E] [T] [_] [_] [_] [_] [_] [_] [_]
Street

[C][A][N][A][N][D][A][I][G][U][A] [] [] [] [] [] [] [] [] [] [] []
City

State Zip

Telephone Number[7][1][6]]-[3][9][4]]-[3][6][8][0]

1.13 This reporting year is from [0] [1] [8] [8] to [1] [2] [8] [8]
Mo. Year Mo. Year

☐ Mark (X) this box if you attach a continuation sheet.

[illegible]

Employer ID Number[][][][][][][][]

Date of Sale [] [] [] [] [] []
Mo. Day Year

Contact Person []

Telephone Number() () () -() () () -() () () ()

N/A

CBI Name of Buyer []
[] Mailing Address []
Street
[]
City
[][] [][][][][]--([][][][])
StateZip

Employer ID Number() () () () () () ()

Date of Purchase [] [] [] [] [] []
Mo. Day Year

[illegible]

Telephone Number() () () -() () () -() () ()

8

1.16 For each classification listed below, state the quantity of the listed substance that was manufactured, imported, or processed at your facility during the reporting year.

CBI

| <input type="checkbox"/> <u>Classification</u> | <u>Quantity (kg/yr)</u> |
|--|-------------------------|
| Manufactured | <u>0.0</u> |
| Imported | <u>0.0</u> |
| Processed (include quantity repackaged) | <u>41,277.6 kg/yr</u> |
| Of that quantity manufactured or imported, report that quantity: | |
| In storage at the beginning of the reporting year | <u>0.0</u> |
| For on-site use or processing | <u>0.0</u> |
| For direct commercial distribution (including export) | <u>0.0</u> |
| In storage at the end of the reporting year | <u>0.0</u> |
| Of that quantity processed, report that quantity: | |
| In storage at the beginning of the reporting year | <u>0.0</u> |
| Processed as a reactant (chemical producer) | <u>0.0</u> |
| Processed as a formulation component (mixture producer) | <u>0.0</u> |
| Processed as an article component (article producer) | <u>41,277.6 kg/yr</u> |
| Repackaged (including export) | <u>0.0</u> |
| In storage at the end of the reporting year | <u>0.0</u> |

☐ Mark (X) this box if you attach a continuation sheet.

✓
2.04 State the quantity of the listed substance that your facility manufactured, imported, or processed during the 3 corporate fiscal years preceding the reporting year in descending order.

CBI

☐ Year ending 12 87
Mo. Year

Quantity manufactured 0.0 kg

Quantity imported 0.0 kg

Quantity processed 54,391.2 kg

Year ending 12 86
Mo. Year

Quantity manufactured 0.0 kg

Quantity imported 0.0 kg

Quantity processed UK kg

Year ending 12 85
Mo. Year

Quantity manufactured 0.0 kg

Quantity imported 0.0 kg

Quantity processed UK kg

2.05 Specify the manner in which you manufactured the listed substance. Circle all appropriate process types.

CBI

N/A

☐ Continuous process 1

Semicontinuous process 2

Batch process 3

☐ Mark (X) this box if you attach a continuation sheet.

- ✓ 2.06 Specify the manner in which you processed the listed substance. Circle all appropriate process types.

☐ Continuous process 1
☒ Semicontinuous process (2)
☐ Batch process 3

- ✓ 2.07 State your facility's name-plate capacity for manufacturing or processing the listed substance. (If you are a batch manufacturer or batch processor, do not answer this question.)

☐ Manufacturing capacity kg/yr
Processing capacity UK kg/yr

- ✓ 2.08 If you intend to increase or decrease the quantity of the listed substance manufactured, imported, or processed at any time after your current corporate fiscal year, estimate the increase or decrease based upon the reporting year's production volume.

| <input type="checkbox"/> | Manufacturing Quantity (kg) | Importing Quantity (kg) | Processing Quantity (kg) |
|--------------------------|--------------------------------|----------------------------|----------------------------------|
| Amount of increase | | | |
| Amount of decrease | 0 | 0 | 41,277.6 kg/yr total decrease |

In 1989 we have decreased our use of TDI by 50%.
By 1990 we will no longer be using TDI.

☐ Mark (X) this box if you attach a continuation sheet.

✓ 2.09 For the three largest volume manufacturing or processing process types involving the listed substance, specify the number of days you manufactured or processed the listed substance during the reporting year. Also specify the average number of hours per day each process type was operated. (If only one or two operations are involved, list those.)

CBI

☐

Days/Year Average
Hours/Day

Process Type #1 (The process type involving the largest quantity of the listed substance.)

| | | |
|--------------------|------------|----------|
| Manufactured | <u>0</u> | <u>0</u> |
| Processed | <u>200</u> | <u>7</u> |

Process Type #2 (The process type involving the 2nd largest quantity of the listed substance.)

| | | |
|--------------------|------------|-----------|
| Manufactured | <u>0</u> | <u>0</u> |
| Processed | <u>100</u> | <u>10</u> |

Process Type #3 (The process type involving the 3rd largest quantity of the listed substance.)

| | | |
|--------------------|-----------|----------|
| Manufactured | <u>0</u> | <u>0</u> |
| Processed | <u>40</u> | <u>7</u> |

✓ 2.10 State the maximum daily inventory and average monthly inventory of the listed substance that was stored on-site during the reporting year in the form of a bulk chemical.

CBI

☐

| | | |
|---------------------------------|-------|----|
| Maximum daily inventory | _____ | kg |
| Average monthly inventory | _____ | kg |

☐ Mark (X) this box if you attach a continuation sheet.

✓ 2.11 Related Product Types -- List any byproducts, coproducts, or impurities present with the listed substance in concentrations greater than 0.1 percent as it is manufactured, imported, or processed. The source of byproducts, coproducts, or impurities means the source from which the byproducts, coproducts, or impurities are made or introduced into the product (e.g., carryover from raw material, reaction product, etc.).

CBI

☐

| <u>CAS No.</u> | <u>Chemical Name</u> | <u>Byproduct, Coproduct or Impurity¹</u> | <u>Concentration (%) (specify ± % precision)</u> | <u>Source of By-products, Coproducts, or Impurities</u> |
|----------------|----------------------|---|--|---|
| | | N/A | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |

¹Use the following codes to designate byproduct, coproduct, or impurity:

B = Byproduct
C = Coproduct
I = Impurity

☐ Mark (X) this box if you attach a continuation sheet.

- ✓ 2.12 Existing Product Types -- List all existing product types which you manufactured, imported, or processed using the listed substance during the reporting year. List the quantity of listed substance you use for each product type as a percentage of the total volume of listed substance used during the reporting year. Also list the quantity of listed substance used captively on-site as a percentage of the value listed under column b., and the types of end-users for each product type. (Refer to CBI ☐ the instructions for further explanation and an example.)

| a. Product Types ¹ | b. % of Quantity Manufactured, Imported, or Processed | c. % of Quantity Used Captively On-Site | d. Type of End-Users ² |
|----------------------------------|---|--|--------------------------------------|
| B | 100% | 100% | I |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |

¹Use the following codes to designate product types:

| | |
|--|---|
| A = Solvent | L = Moldable/Castable/Rubber and additives |
| B = Synthetic reactant | M = Plasticizer |
| C = Catalyst/Initiator/Accelerator/ Sensitizer | N = Dye/Pigment/Colorant/Ink and additives |
| D = Inhibitor/Stabilizer/Scavenger/ Antioxidant | O = Photographic/Reprographic chemical and additives |
| E = Analytical reagent | P = Electrodeposition/Plating chemicals |
| F = Chelator/Coagulant/Sequestrant | Q = Fuel and fuel additives |
| G = Cleanser/Detergent/Degreaser | R = Explosive chemicals and additives |
| H = Lubricant/Friction modifier/Antiwear agent | S = Fragrance/Flavor chemicals |
| I = Surfactant/Emulsifier | T = Pollution control chemicals |
| J = Flame retardant | U = Functional fluids and additives |
| K = Coating/Binder/Adhesive and additives | V = Metal alloy and additives |
| | W = Rheological modifier |
| | X = Other (specify) _____ |

²Use the following codes to designate the type of end-users:

| | |
|-----------------|---------------------------|
| I = Industrial | CS = Consumer |
| CM = Commercial | H = Other (specify) _____ |

☐ Mark (X) this box if you attach a continuation sheet.

✓ 2.13 Expected Product Types -- Identify all product types which you expect to manufacture, import, or process using the listed substance at any time after your current corporate fiscal year. For each use, specify the quantity you expect to manufacture, import, or process for each use as a percentage of the total volume of listed substance used during the reporting year. Also list the quantity of listed substance used captively on-site as a percentage of the value listed under column b., and the types of end-users for each product type. (Refer to the instructions for further explanation and an example.)

CBI

☐

| a. | b. | c. | d. |
|----------------------------|---|--|--------------------------------|
| Product Types ¹ | % of Quantity Manufactured, Imported, or Processed | % of Quantity Used Captively On-Site | Type of End-Users ² |
| NONE | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |

¹Use the following codes to designate product types:

| | |
|--|---|
| A = Solvent | L = Moldable/Castable/Rubber and additives |
| B = Synthetic reactant | M = Plasticizer |
| C = Catalyst/Initiator/Accelerator/ Sensitizer | N = Dye/Pigment/Colorant/Ink and additives |
| D = Inhibitor/Stabilizer/Scavenger/ Antioxidant | O = Photographic/Reprographic chemical and additives |
| E = Analytical reagent | P = Electrodeposition/Plating chemicals |
| F = Chelator/Coagulant/Sequestrant | Q = Fuel and fuel additives |
| G = Cleanser/Detergent/Degreaser | R = Explosive chemicals and additives |
| H = Lubricant/Friction modifier/Antiwear agent | S = Fragrance/Flavor chemicals |
| I = Surfactant/Emulsifier | T = Pollution control chemicals |
| J = Flame retardant | U = Functional fluids and additives |
| K = Coating/Binder/Adhesive and additives | V = Metal alloy and additives |
| | W = Rheological modifier |
| | X = Other (specify) _____ |

²Use the following codes to designate the type of end-users:

| | |
|-----------------|---------------------------|
| I = Industrial | CS = Consumer |
| CM = Commercial | H = Other (specify) _____ |

☐ Mark (X) this box if you attach a continuation sheet.

2.14 Final Product -- Complete the following table for each type of final product manufactured, imported, or processed at your facility that contains the listed substance other than as an impurity.

☐

| a. | b. | c. | d. |
|---------------------------|--|--|--------------------------------|
| Product Type ¹ | Final Product's Physical Form ² | Average % Composition of Listed Substance in Final Product | Type of End-Users ³ |
| | N/A | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |

¹Use the following codes to designate product types:

| | |
|--|---|
| A = Solvent | L = Moldable/Castable/Rubber and additives |
| B = Synthetic reactant | M = Plasticizer |
| C = Catalyst/Initiator/Accelerator/ Sensitizer | N = Dye/Pigment/Colorant/Ink and additives |
| D = Inhibitor/Stabilizer/Scavenger/ Antioxidant | O = Photographic/Reprographic chemical and additives |
| E = Analytical reagent | P = Electrodeposition/Plating chemicals |
| F = Chelator/Coagulant/Sequestrant | Q = Fuel and fuel additives |
| G = Cleanser/Detergent/Degreaser | R = Explosive chemicals and additives |
| H = Lubricant/Friction modifier/Antiwear agent | S = Fragrance/Flavor chemicals |
| I = Surfactant/Emulsifier | T = Pollution control chemicals |
| J = Flame retardant | U = Functional fluids and additives |
| K = Coating/Binder/Adhesive and additives | V = Metal alloy and additives |
| | W = Rheological modifier |
| | X = Other (specify) _____ |

²Use the following codes to designate the final product's physical form:

| | |
|----------------------|---------------------------|
| A = Gas | F2 = Crystalline solid |
| B = Liquid | F3 = Granules |
| C = Aqueous solution | F4 = Other solid |
| D = Paste | G = Gel |
| E = Slurry | H = Other (specify) _____ |
| F1 = Powder | |

³Use the following codes to designate the type of end-users:

| | |
|-----------------|---------------------------|
| I = Industrial | CS = Consumer |
| CM = Commercial | H = Other (specify) _____ |

☐ Mark (X) this box if you attach a continuation sheet.

✓ 2.15 Circle all applicable modes of transportation used to deliver bulk shipments of the
CBI listed substance to off-site customers.

N/A

- ☐ Truck 1
Railcar 2
Barge, Vessel 3
Pipeline 4
Plane 5
Other (specify) _____ 6

✓ 2.16 Customer Use -- Estimate the quantity of the listed substance used by your customers
CBI or prepared by your customers during the reporting year for use under each category
of end use listed (i-iv).

N/A

☐ Category of End Use

i. Industrial Products

Chemical or mixture kg/yr

Article kg/yr

ii. Commercial Products

Chemical or mixture kg/yr

Article kg/yr

iii. Consumer Products

Chemical or mixture kg/yr

Article kg/yr

iv. Other

Distribution (excluding export) kg/yr

Export kg/yr

Quantity of substance consumed as reactant kg/yr

Unknown customer uses kg/yr

☐ Mark (X) this box if you attach a continuation sheet.

SECTION 3 PROCESSOR RAW MATERIAL IDENTIFICATION

PART A GENERAL DATA

- 3.01 Specify the quantity purchased and the average price paid for the listed substance for each major source of supply listed. Product trades are treated as purchases.
CBI The average price is the market value of the product that was traded for the listed substance.

☐

| <u>Source of Supply</u> | <u>Quantity (kg)</u> | <u>Average Price (\$/kg)</u> |
|--|--------------------------|----------------------------------|
| The listed substance was manufactured on-site. | 0.0 | 0.0 |
| The listed substance was transferred from a different company site. | 0.0 | 0.0 |
| The listed substance was purchased directly from a manufacturer or importer. | 41,277.6 | \$2.91 |
| The listed substance was purchased from a distributor or repackager. | 0.0 | 0.0 |
| The listed substance was purchased from a mixture producer. | 0.0 | 0.0 |

- 3.02 Circle all applicable modes of transportation used to deliver the listed substance to your facility.

☐

- ☒ Truck 1
Railcar 2
Barge, Vessel 3
Pipeline 4
Plane 5
Other (specify) _____ 6

☐ Mark (X) this box if you attach a continuation sheet.

✓ 3.03 a. Circle all applicable containers used to transport the listed substance to your
CBI facility.

☐

Bags 1
Boxes 2
Free standing tank cylinders 3
Tank rail cars 4
Hopper cars 5
Tank trucks 6
Hopper trucks 7
Drums 8
Pipeline 9
Other (specify) _____ 10

b. If the listed substance is transported in pressurized tank cylinders, tank rail cars, or tank trucks, state the pressure of the tanks.

Tank cylinders mmHg
Tank rail cars mmHg
Tank trucks mmHg

☐ Mark (X) this box if you attach a continuation sheet.

PART B RAW MATERIAL IN THE FORM OF A MIXTURE

✓ 3.04 If you obtain the listed substance in the form of a mixture, list the trade name(s) of the mixture, the name of its supplier(s) or manufacturer(s), an estimate of the average percent composition by weight of the listed substance in the mixture, and the amount of mixture processed during the reporting year.

CBI

☐

| <u>Trade Name</u> | <u>Supplier or Manufacturer</u> | <u>Average % Composition by Weight (specify ± % precision)</u> | <u>Amount Processed (kg/yr)</u> |
|-------------------|-------------------------------------|--|---|
| | | N/A | |
| | | | |
| | | | |
| | | | |
| | | | |

☐ Mark (X) this box if you attach a continuation sheet.

✓ PART C RAW MATERIAL VOLUME

3.05 State the quantity of the listed substance used as a raw material during the reporting year in the form of a class I chemical, class II chemical, or polymer, and the percent composition, by weight, of the listed substance.

☐

| | Quantity Used (kg/yr) | % Composition by Weight of Listed Sub- stance in Raw Material (specify ± % precision) |
|-------------------|--------------------------|--|
| Class I chemical | 4762.8 | 40% |
| | 36,514.8 | 50% |
| | | |
| Class II chemical | | |
| | | |
| | | |
| Polymer | | |
| | | |
| | | |
| | | |

☐ Mark (X) this box if you attach a continuation sheet.

SECTION 4 PHYSICAL/CHEMICAL PROPERTIES

General Instructions:

If you are reporting on a mixture as defined in the glossary, reply to questions in Section 4 that are inappropriate to mixtures by stating "NA -- mixture."

For questions 4.06-4.15, if you possess any hazard warning statement, label, MSDS, or other notice that addresses the information requested, you may submit a copy or reasonable facsimile in lieu of answering those questions which it addresses.

PART A PHYSICAL/CHEMICAL DATA SUMMARY

- ✓ 4.01 Specify the percent purity for the three major¹ technical grade(s) of the listed substance as it is manufactured, imported, or processed. Measure the purity of the substance in the final product form for manufacturing activities, at the time you import the substance, or at the point you begin to process the substance.

CBI
☐

| | <u>Manufacture</u> | <u>Import</u> | <u>Process</u> |
|--------------------|--------------------|----------------|-------------------------|
| Technical grade #1 | _____ % purity | _____ % purity | _____ UK _____ % purity |
| Technical grade #2 | _____ % purity | _____ % purity | _____ UK _____ % purity |
| Technical grade #3 | _____ % purity | _____ % purity | _____ UK _____ % purity |

¹Major = Greatest quantity of listed substance manufactured, imported or processed.

- ✓ 4.02 Submit your most recently updated Material Safety Data Sheet (MSDS) for the listed substance, and for every formulation containing the listed substance. If you possess an MSDS that you developed and an MSDS developed by a different source, submit your version. Indicate whether at least one MSDS has been submitted by circling the appropriate response.

☒ Yes 1
No 2

Indicate whether the MSDS was developed by your company or by a different source.

Your company 1

☒ Another source 2

☐ Mark (X) this box if you attach a continuation sheet.

**MATERIAL SAFETY
DATA SHEET**

BASF Corporation Chemicals Division
100 Cherry Hill Road, Parsippany, New Jersey 07054, (201) 316-3000

BASF

HMIS: H4 F1 R1

05-9903

PRODUCT NUMBER: 585415 PXD 88-12 Isocyanate

SECTION I

*Registered Trademark

TRADE NAME: PXD 88-12 Isocyanate

CHEMICAL NAME: Isocyanate Prepolymer

SYNONYMS: TDI Prepolymer

FORMULA: Mixture

CHEMICAL FAMILY: Aromatic Isocyanates

MOL. WGT.: N/A

SECTION II -- INGREDIENTS

| COMPONENT | CAS NO. | % | PEL/TLV - SOURCE |
|--|---------------------|------------|--|
| PXD 88-12 Isocyanate Contains: Toluene Diisocyanate--TDI | 584-84-9 91-08-7 | 100 >40 | Not established 0.005 ppm ACGIH 1983 0.02 ppm Ceiling OSHA PEL |
| Isocyanate Prepolymer Diphenylmethane Diisocyanate--MDI | 101-88-8 | >45 <15 | Not established 0.005 ppm, ACGIH 0.02 ppm Ceiling, OSHA |
| SARA Title III Sect. 313: Listed. All components are in TSCA inventory. | | | |

SECTION III -- PHYSICAL DATA

| | |
|--|---------------------------|
| BOILING/MELTING POINT @760 mm Hg: N/A | pH: N/A |
| VAPOR PRESSURE mm Hg @20 C: 0.01 (TDI) | Viscosity@ 77 F :400 cps. |
| SPECIFIC GRAVITY OR BULK DENSITY: 1.15 | |
| SOLUBILITY IN WATER: Water Reacts | |
| APPEARANCE: Dark Brown Liquid | ODOR: Pungent |
| | INTENSITY: Strong |

SECTION IV -- FIRE AND EXPLOSION HAZARD DATA

| | |
|--|---|
| FLASH POINT (TEST METHOD): >200 F PMCT | AUTOIGNITION TEMP: N/A |
| FLAMMABILITY LIMITS IN AIR (% BY VOL) LOWER: N/A | UPPER: N/A |
| EXTINGUISHING MEDIUM | Use water fog, foam or CO2 extinguishing media. |
| SPECIAL FIREFIGHTING PROCEDURES | Firefighters must be equipped with self-contained breathing apparatus and turnout gear. Personnel engaged in fighting isocyanate fires must be protected against nitrogen dioxide fumes as well as isocyanate vapors. |
| UNUSUAL FIRE AND EXPLOSION HAZARDS | Avoid water contamination in closed containers or confined areas; carbon dioxide gas is generated. |

EMERGENCY TELEPHONE NUMBER

CHEMTREC 800-424-9300

201-316-3000

THIS NUMBER IS AVAILABLE DAYS, NIGHTS, WEEKENDS, AND HOLIDAYS

SECTION V - HEALTH DATA

TOXICOLOGICAL TEST DATA:

PXD 68-12 Isocyanate

Toluene Diisocyanate--TDI

Rat, Oral LD50

Mouse, Inhalation LC50

Diphenylmethane Diisocyanate--MDI

RESULT:

Severe eye and skin
irritant, sensitizer

5.8 g/kg.

10 ppm/4 H

Respiratory sensitization
possible

EFFECTS OF OVEREXPOSURE:

Inhalation of the vapors causes severe irritation to lungs and pulmonary edema can occur after a serious vapor exposure.
Liquid contact causes serious skin and eye burns.
Pulmonary sensitization can occur in some individuals leading to asthma-type spasms of the bronchial tubes and difficulty in breathing.
Preclude from exposure to those individuals having a history of respiratory illness, asthmatic conditions, eye damage or TDI sensitization.
Recent studies indicate that overexposure may be associated with chronic lung impairment.
In a National Toxicology Program (NTP) study, TDI was carcinogenic when given orally to rats and mice at maximum tolerated doses.
TDI was not carcinogenic to rats in a two-year inhalation study.
Based on the results of the oral study, TDI was included in the NTP Annual Report on Carcinogens.

FIRST AID PROCEDURES:

Eyes-Immediately wash eyes with running water for 15 minutes.
Get immediate medical attention.
Skin-Wash affected areas with water while removing contaminated clothing. Get immediate medical attention. Launder contaminated clothing before reuse.
Ingestion-If swallowed, DO NOT INDUCE VOMITING. Dilute with water or milk and get immediate medical attention. Never give fluids or induce vomiting if the victim is unconscious or having convulsions.
Inhalation-Move to fresh air. Aid in breathing, if necessary, and get immediate medical attention.

SECTION VI - REACTIVITY DATA

STABILITY:

Stable.

CONDITIONS TO AVOID:

Avoid temperatures >40 C for extended periods of time.

CHEMICAL INCOMPATIBILITY:

Basic compounds, caustic soda, tertiaryamines, water.

HAZARDOUS DECOMPOSITION PRODUCTS:

TDI vapors, NOx, CO and HCN.

HAZARDOUS POLYMERIZATION:

May occur.

Avoid contamination with moisture

CONDITIONS TO AVOID:

and other products that react with isocyanates.

CORROSIVE TO METAL:

No

OXIDIZER:

No

SECTION VII - SPECIAL PROTECTION

RESPIRATORY PROTECTION:

Approved respirator for transferring operations or escape.
Self-contained breathing apparatus if the P.E.L. is exceeded, or in confined areas or if a leak occurs.

EYE PROTECTION:

Wear fitted goggles or face shield and safety glasses.

PROTECTIVE CLOTHING:

Rubber gloves, coveralls, boots, and rubber apron which must be cleaned after each use.

VENTILATION:

Use local exhaust wherever vapors are generated.

OTHER:

Maintain work area below P.E.L.

Pg. 402.2

PRODUCT NUMBER: 585415 PXD 88-12 Isocyanate

SECTION VIII -- ENVIRONMENTAL DATA

ENVIRONMENTAL TOXICITY DATA:

Aquatic toxicity rating: TLM 98: 10 ppm - 1 ppm.

SPILL AND LEAK PROCEDURES:

PXD 88-12 Isocyanate is a RCRA-regulated product. Wear protective clothing and evacuate all not involved in the cleanup. For minor spills, absorb with absorbent and containerize into open top drums. Decontaminate spill area with a mixture of 90% water, 8% concentrated ammonia and:

HAZARDOUS SUBSTANCE SUPERFUND: Yes RQ (lbs): 100

WASTE DISPOSAL METHOD:

2% detergent. Dispose of waste in a RCRA-permitted facility. Incinerate or landfill in a RCRA-permitted facility.

HAZARDOUS WASTE 40CFR261: Yes

HAZARDOUS WASTE NUMBER: U 223

CONTAINER DISPOSAL:

Containers should be neutralized with liquid decontaminant. Empty containers, containing less than 1" of residue, may be landfilled. If containers are not empty, they must be disposed as a hazardous waste in a RCRA-licensed facility.

SECTION IX -- SHIPPING DATA

D.O.T. PROPER SHIPPING NAME (49CFR172.101-102)

Poison B, Liquid NOS

HAZARDOUS SUBSTANCE (49CFR CERCLA LIST)

Yes--TDI

REPORTABLE QUANTITY (RQ) 1 lb.

D.O.T. HAZARD CLASSIFICATION (CFR172.101-102)

PRIMARY

Poison B

SECONDARY

D.O.T. LABELS REQUIRED (49CFR172.101-102)

Poison

D.O.T. PLACARDS REQUIRED (CFR172.504)

Poison

POISON CONSTITUENT (49CFR172.203(K))

TDI

BILL OF LADING DESCRIPTION

Poison B Liquid, NOS (Contains Toluene Diisocyanate) - UN 2810 RQ
Placarded Poison
(Plastic Synthetic Liquid, NOIBN)

CC NO. 217

UN/NA CODE 2810

DATE PREPARED: 6 / 3 / 88

UPDATED: 3 / 14 / 89

pg 402.3
WHILE BASF CORPORATION BELIEVES THE DATA SET FORTH HEREIN ARE ACCURATE AS OF THE DATE HEREOF, BASF CORPORATION MAKES NO WARRANTY WITH RESPECT THERETO AND EXPRESSLY DISCLAIMS ALL LIABILITY FOR RELIANCE THEREON. SUCH DATA ARE OFFERED SOLELY FOR YOUR CONSIDERATION, INVESTIGATION, AND VERIFICATION.

SECTION X - PRODUCT LABEL**PXO 68-12 Isocyanate**

DANGER: POISON. HARMFUL IF INHALED.
CONTAINS TOLUENE DIISOCYANATE (CAS Nos.: 584-84-9; 91-08-7); DIPHENYLMETHANE DIISOCYANATE (CAS No.: 101-68-8).
CONTACT WITH EYES AND SKIN RESULTS IN SERIOUS BURNS. INHALATION OF VAPORS CAUSES SEVERE IRRITATION TO LUNGS. PULMONARY EDEMA MAY OCCUR. PULMONARY SENSITIZATION CAN OCCUR IN SOME INDIVIDUALS, LEADING TO ASTHMA-TYPE SPASMS OF THE BRONCHIAL TUBES AND DIFFICULTY IN BREATHING. INDIVIDUALS WITH A HISTORY OF RESPIRATORY ILLNESS, ASTHMATIC CONDITIONS, EYE DAMAGE OR TDI SENSITIZATION SHOULD NOT BE EXPOSED TO THIS PRODUCT.
IN AN NTP STUDY, TDI WAS CARCINOGENIC TO RODENTS GIVEN HIGH ORAL DOSES AND IS INCLUDED IN THE NTP ANNUAL REPORT ON CARCINOGENS. TDI WAS NOT CARCINOGENIC TO RATS IN A TWO-YEAR INHALATION STUDY.

Use with local exhaust. Wear an approved respirator or self-contained breathing apparatus, fitted goggles or face shield and safety glasses, gloves, coveralls, boots, apron and other protective clothing as necessary to prevent contact.

FIRST AID:

Eyes-Immediately wash eyes with running water for 15 minutes.

Get immediate medical attention.

Skin-Wash affected areas with water while removing contaminated clothing. Get immediate medical attention. Launder contaminated clothing before reuse.

Ingestion-If swallowed, DO NOT INDUCE VOMITING. Dilute with water or milk and get immediate medical attention. Never give fluids or induce vomiting if the victim is unconscious or having convulsions.

Inhalation-Move to fresh air. Aid in breathing, if necessary, and get immediate medical attention.

HANDLING AND STORAGE: Keep containers closed and store in a dry, well-ventilated place. Outage should be filled with dry inert gas at atmospheric pressure to avoid reaction with moisture. Contamination by moisture or basic compounds can cause dangerous pressure buildup in a closed container. Store above 60 F to prevent freezing and isomer separation. Do not exceed 95 F while thawing. Mix before using.

IN CASE OF SPILLS OR LEAKS: Material is a RCRA-regulated product. Spills should be contained, absorbed and placed in suitable containers for disposal in a RCRA-licensed facility.

IN CASE OF FIRE: Use water fog, foam or CO2 extinguishing media. Firefighters should be equipped with self-contained breathing apparatus and turnout gear for protection against TDI vapors and toxic decomposition products.

EMPTY CONTAINERS: All labeled precautions must be observed when handling, storing and transporting empty containers due to product residues. Do not reuse this container unless it is professionally cleaned and reconditioned.

DISPOSAL: Spilled material, unused contents and empty containers must be disposed of in accordance with local, state and federal regulations. Refer to our Material Safety Data Sheet for specific disposal instructions.

IN CASE OF CHEMICAL EMERGENCY: Call CHEMTREC day or night for assistance and information concerning spilled material, fire, exposure and other chemical accidents 800-424-9300.

ATTENTION: This product is sold solely for use by industrial institutions. Refer to our Technical Bulletin and Material Safety Data Sheet regarding safety, usage, applications, hazards, procedures and disposal of this product. Consult your supervisor for additional information.

HMIS: H4-F1 R1
FOR INDUSTRY USE ONLY.
Proper Shipping Name: Poison B, Liquid NOS - UN 2810 RQ
Made in USA.
Polymers
0389

MATERIAL SAFETY DATA SHEET

BASF Corporation Chemicals Division
100 Cherry Hill Road, Parsippany, New Jersey 07054, (201) 316-3000

OK
6/11/85
BASF

PRODUCT NUMBER: 585363 PXI 4744-63 Isocyanate

| SECTION I | | *Registered Trademark |
|---------------------------------------|--------------|-----------------------|
| TRADE NAME: PXI 4744-63 Isocyanate | | |
| CHEMICAL NAME: N/A | | |
| SYNONYMS: TDI Prepolymer | FORMULA: N/A | |
| CHEMICAL FAMILY: Aromatic Isocyanates | | MOL. WGT.: N/A |

| SECTION II - INGREDIENTS | | | |
|--|---------------------|-----|--|
| COMPONENT | CAS NO. | % | PEL/TLV - SOURCE |
| PXI 4744-63 Isocyanate | | 100 | Not established |
| Contains: | | | |
| Toluene Diisocyanate--TDI | 584-84-9 91-08-7 | >50 | 0.005 ppm ACGIH, 1983 0.02 ppm Ceiling OSHA PEL |
| Isocyanate Prepolymer | | >25 | Not established |
| Diphenylmethane Diisocyanate--MDI | 101-68-8 | <25 | 0.005 ppm, ACGIH 0.02 ppm Ceiling, OSHA |
| All components are in TSCA inventory. SARA Title III Sect. 313: Listed. | | | |

| SECTION III - PHYSICAL DATA | |
|--|--------------------------------------|
| BOILING/MELTING POINT @760 mm Hg: N/A | pH: N/A |
| VAPOR PRESSURE mm Hg @20 C: 0.01 (TDI) | Viscosity@ 77 F : 48 cps. |
| SPECIFIC GRAVITY OR BULK DENSITY: 1.22 | |
| SOLUBILITY IN WATER: Water Reacts | |
| APPEARANCE: Dark Brown Liquid | ODOR: Pungent INTENSITY: Strong |

| SECTION IV - FIRE AND EXPLOSION HAZARD DATA | |
|---|---|
| FLASH POINT (TEST METHOD): >200 F PMCT | AUTOIGNITION TEMP: N/A |
| FLAMMABILITY LIMITS IN AIR (% BY VOL) | LOWER: N/A UPPER: N/A |
| EXTINGUISHING MEDIUM: | Use water fog, foam or CO2 extinguishing media. |
| SPECIAL FIREFIGHTING PROCEDURES | Firefighters must be equipped with self-contained breathing apparatus and turnout gear. Personnel engaged in fighting isocyanate fires must be protected against nitrogen dioxide fumes as well as isocyanate vapors. |
| UNUSUAL FIRE AND EXPLOSION HAZARDS | Avoid water contamination in closed containers or confined areas; carbon dioxide gas is generated. |

| EMERGENCY TELEPHONE NUMBER | |
|---|--------------|
| CHEMTREC 800-424-9300 | 201-316-3000 |
| THIS NUMBER IS AVAILABLE DAYS, NIGHTS, WEEKENDS, AND HOLIDAYS | |

PRODUCT NUMBER: 585363

PXI 4744-63 Isocyanate

SECTION V - HEALTH DATA

TOXICOLOGICAL TEST DATA:

PXI 4744-63 Isocyanate
Toluene Diisocyanate--TDI

Rat, Oral LD50
Mouse, Inhalation LC50
Diphenylmethane Diisocyanate--MDI

RESULT:

Severe eye and skin
irritant, sensitizer
5.8 g/kg.
10 ppm/4 H
Respiratory sensitization
possible

EFFECTS OF OVEREXPOSURE:

Inhalation of the vapors causes severe irritation to lungs and pulmonary edema can occur after a serious vapor exposure.
Liquid contact causes serious skin and eye burns.
Pulmonary sensitization can occur in some individuals leading to asthma-type spasms of the bronchial tubes and difficulty in breathing.
Preclude from exposure to those individuals having a history of respiratory illness, asthmatic conditions, eye damage or TDI sensitization.
Recent studies indicate that overexposure may be associated with chronic lung impairment.
In a National Toxicology Program (NTP) study, TDI was carcinogenic when given orally to rats and mice at maximum tolerated doses.
TDI was not carcinogenic to rats in a two-year inhalation study.
Based on the results of the oral study, TDI was included in the NTP Annual Report on Carcinogens.

FIRST AID PROCEDURES:

Eyes-Immediately wash eyes with running water for 15 minutes.
Get immediate medical attention.
Skin-Wash affected areas with water while removing contaminated clothing. Get immediate medical attention. Launder contaminated clothing before reuse.
Ingestion-If swallowed, DO NOT INDUCE VOMITING. Dilute with water or milk and get immediate medical attention. Never give fluids or induce vomiting if the victim is unconscious or having convulsions.
Inhalation-Move to fresh air. Aid in breathing, if necessary, and get immediate medical attention.

SECTION VI - REACTIVITY DATA

STABILITY:

Stable.

CONDITIONS TO AVOID:

Avoid temperatures >40 C for extended periods of time.

CHEMICAL INCOMPATIBILITY:

Basic compounds, caustic soda, tertiaryamines, water

HAZARDOUS DECOMPOSITION PRODUCTS:

TDI vapors, NOx, CO and HCN.

HAZARDOUS POLYMERIZATION:

May occur.

Avoid contamination with moisture and other products that react with isocyanates.

CONDITIONS TO AVOID:

CORROSIVE TO METAL:

No

OXIDIZER:

No

SECTION VII - SPECIAL PROTECTION

RESPIRATORY PROTECTION:

Approved respirator for transferring operations or escape.
Self-contained breathing apparatus if the P.E.L. is exceeded, or in confined areas or if a leak occurs.

EYE PROTECTION:

Wear fitted goggles or face shield and safety glasses.

PROTECTIVE CLOTHING:

Rubber gloves, coveralls, boots, and rubber apron which must be cleaned after each use.

VENTILATION:

Use local exhaust wherever vapors are generated.

OTHER:

Maintain work area below P.E.L.

PRODUCT NUMBER: 585363

PXI 4744-63 Isocyanate

SECTION VIII - ENVIRONMENTAL DATA**ENVIRONMENTAL TOXICITY DATA:**

Aquatic toxicity rating: TLM 98: 10 ppm - 1 ppm.

SPILL AND LEAK PROCEDURES:

PXI 4744-63 Isocyanate is a RCRA-regulated product. Wear protective clothing and evacuate all not involved in the cleanup. For minor spills, absorb with absorbent and containerize into open top drums. Decontaminate spill area with a mixture of 90% water, 8% concentrated ammonia and

HAZARDOUS SUBSTANCE SUPERFUND: Yes RQ (lbs): 100**WASTE DISPOSAL METHOD:**

2% detergent. Dispose of waste in a RCRA-permitted facility.
Incinerate or landfill in a RCRA-permitted facility.

HAZARDOUS WASTE 40CFR261: Yes**HAZARDOUS WASTE NUMBER:** U 223**CONTAINER DISPOSAL:**

Containers should be neutralized with liquid decontaminant. Empty containers, containing less than 1" of residue, may be landfilled. If containers are not empty, they must be disposed as a hazardous waste in a RCRA-licensed facility.

SECTION IX - SHIPPING DATA**D.O.T. PROPER SHIPPING NAME (49CFR172.101-102)**

Poison B, Liquid NOS

**HAZARDOUS SUBSTANCE
(49CFR CERCLA LIST)**

Yes--TDI

REPORTABLE QUANTITY (RQ) 1 lb.**D.O.T. HAZARD CLASSIFICATION (CFR172.101-102)****PRIMARY**

Poison B

SECONDARY**D.O.T. LABELS REQUIRED (49CFR172.101-102)**

Poison

**D.O.T. PLACARDS
REQUIRED (CFR172.504)**
Poison**POISON CONSTITUENT
(49CFR172.203(K))**
TDI**BILL OF LADING DESCRIPTION**

Poison B Liquid, NOS (Contains Toluene Diisocyanate) - UN 2810 RQ
Placarded Poison
(Plastic Synthetic Liquid, NOIBN)

CC NO.

217

UN/NA CODE 2810**DATE PREPARED:** 12 / 4 / 88**UPDATED:** 1 / 24 / 89

WHILE BASF CORPORATION BELIEVES THE DATA SET FORTH HEREIN ARE ACCURATE AS OF THE DATE HEREOF, BASF CORPORATION MAKES NO WARRANTY WITH RESPECT THERETO AND EXPRESSLY DISCLAIMS ALL LIABILITY FOR RELIANCE THEREON. SUCH DATA ARE OFFERED SOLELY FOR YOUR CONSIDERATION, INVESTIGATION, AND VERIFICATION.

402.7

SECTION X -- PRODUCT LABEL**PXI 4744-63 Isocyanate**

DANGER: POISON. HARMFUL IF INHALED.

CONTAINS TOLUENE DIISOCYANATE (CAS Nos.: 584-84-9; 91-08-7); DIPHENYLMETHANE DIISOCYANATE (CAS No.: 101-68-8).

CONTACT WITH EYES AND SKIN RESULTS IN SERIOUS BURNS. INHALATION OF VAPORS CAUSES SEVERE IRRITATION TO LUNGS. PULMONARY EDEMA MAY OCCUR. PULMONARY SENSITIZATION CAN OCCUR IN SOME INDIVIDUALS, LEADING TO ASTHMA-TYPE SPASMS OF THE BRONCHIAL TUBES AND DIFFICULTY IN BREATHING. INDIVIDUALS WITH A HISTORY OF RESPIRATORY ILLNESS, ASTHMATIC CONDITIONS, EYE DAMAGE OR TDI SENSITIZATION SHOULD NOT BE EXPOSED TO THIS PRODUCT.

IN AN NTP STUDY, TDI WAS CARCINOGENIC TO RODENTS GIVEN HIGH ORAL DOSES AND IS INCLUDED IN THE NTP ANNUAL REPORT ON CARCINOGENS. TDI WAS NOT CARCINOGENIC TO RATS IN A TWO-YEAR INHALATION STUDY.

Use with local exhaust. Wear an approved respirator or self-contained breathing apparatus, fitted goggles or face shield and safety glasses, gloves, coveralls, boots, apron and other protective clothing as necessary to prevent contact.

FIRST AID:

Eyes-Immediately wash eyes with running water for 15 minutes.

Get immediate medical attention.

Skin-Wash affected areas with water while removing contaminated clothing. Get immediate medical attention. Launder contaminated clothing before reuse.

Ingestion-If swallowed, DO NOT INDUCE VOMITING. Dilute with water or milk and get immediate medical attention. Never give fluids or induce vomiting if the victim is unconscious or having convulsions.

Inhalation-Move to fresh air. Aid in breathing, if necessary, and get immediate medical attention.

HANDLING AND STORAGE: Keep containers closed and store in a dry, well-ventilated place. Outage should be filled with dry inert gas at atmospheric pressure to avoid reaction with moisture. Contamination by moisture or basic compounds can cause dangerous pressure buildup in a closed container. Store above 60 F to prevent freezing and isomer separation. Do not exceed 95 F while thawing. Mix before using.

IN CASE OF SPILLS OR LEAKS: Material is a RCRA-regulated product. Spills should be contained, absorbed and placed in suitable containers for disposal in a RCRA-licensed facility.

IN CASE OF FIRE: Use water fog, foam or CO2 extinguishing media. Firefighters should be equipped with self-contained breathing apparatus and turnout gear for protection against TDI vapors and toxic decomposition products.

EMPTY CONTAINERS: All labeled precautions must be observed when handling, storing and transporting empty containers due to product residues. Do not reuse this container unless it is professionally cleaned and reconditioned.

DISPOSAL: Spilled material, unused contents and empty containers must be disposed of in accordance with local, state and federal regulations. Refer to our Material Safety Data Sheet for specific disposal instructions.

IN CASE OF CHEMICAL EMERGENCY: Call CHEMTREC day or night for assistance and information concerning spilled material, fire, exposure and other chemical accidents 800-424-9300.

ATTENTION: This product is sold solely for use by industrial institutions. Refer to our Technical Bulletin and Material Safety Data Sheet regarding safety, usage, applications, hazards, procedures and disposal of this product. Consult your supervisor for additional information.

FOR INDUSTRY USE ONLY.

Proper Shipping Name: Poison B, Liquid NOS - UN 2810 RQ

Made in USA.

Polymers

0987

402.8

- ✓ 4.03 Submit a copy or reasonable facsimile of any hazard information (other than an MSDS) that is provided to your customers/users regarding the listed substance or any formulation containing the listed substance. Indicate whether this information has been submitted by circling the appropriate response.

Yes 1

☒ No 2

- ✓ 4.04 For each activity that uses the listed substance, circle all the applicable number(s) corresponding to each physical state of the listed substance during the activity listed. Physical states for importing and processing activities are determined at the time you import or begin to process the listed substance. Physical states for manufacturing, storage, disposal and transport activities are determined using the final state of the product.

CBI

☐

| Activity | Physical State | | | | |
|-------------|----------------|------------------------------------|------------------------------------|---------------|-----|
| | Solid | Slurry | Liquid | Liquified Gas | Gas |
| Manufacture | 1 | 2 | 3 | 4 | 5 |
| Import | 1 | 2 | 3 | 4 | 5 |
| Process | 1 | 2 | <input checked="" type="radio"/> 3 | 4 | 5 |
| Store | 1 | 2 | <input checked="" type="radio"/> 3 | 4 | 5 |
| Dispose | 1 | <input checked="" type="radio"/> 2 | 3 | 4 | 5 |
| Transport | 1 | 2 | 3 | 4 | 5 |

☐ Mark (X) this box if you attach a continuation sheet.

- ✓ 4.05 Particle Size -- If the listed substance exists in particulate form during any of the following activities, indicate for each applicable physical state the size and the percentage distribution of the listed substance by activity. Do not include particles ≥ 10 microns in diameter. Measure the physical state and particle sizes for importing and processing activities at the time you import or begin to process the listed substance. Measure the physical state and particle sizes for manufacturing storage, disposal and transport activities using the final state of the product.

CBI

☐

| | | N/A | | | | | |
|----------------|------------------|-------------|--------|---------|-------|---------|-----------|
| Physical State | | Manufacture | Import | Process | Store | Dispose | Transport |
| Dust | <1 micron | _____ | _____ | _____ | _____ | _____ | _____ |
| | 1 to <5 microns | _____ | _____ | _____ | _____ | _____ | _____ |
| | 5 to <10 microns | _____ | _____ | _____ | _____ | _____ | _____ |
| Powder | <1 micron | _____ | _____ | _____ | _____ | _____ | _____ |
| | 1 to <5 microns | _____ | _____ | _____ | _____ | _____ | _____ |
| | 5 to <10 microns | _____ | _____ | _____ | _____ | _____ | _____ |
| Fiber | <1 micron | _____ | _____ | _____ | _____ | _____ | _____ |
| | 1 to <5 microns | _____ | _____ | _____ | _____ | _____ | _____ |
| | 5 to <10 microns | _____ | _____ | _____ | _____ | _____ | _____ |
| Aerosol | <1 micron | _____ | _____ | _____ | _____ | _____ | _____ |
| | 1 to <5 microns | _____ | _____ | _____ | _____ | _____ | _____ |
| | 5 to <10 microns | _____ | _____ | _____ | _____ | _____ | _____ |

☐ Mark (X) this box if you attach a continuation sheet.

SECTION 5 ENVIRONMENTAL FATE

PART A RATE CONSTANTS AND TRANSFORMATION PRODUCTS

5.01 Indicate the rate constants for the following transformation processes.

✓ a. Photolysis:

Absorption spectrum coefficient (peak) UK (1/M cm) at UK nm
Reaction quantum yield, ϕ UK at UK nm
Direct photolysis rate constant, k_p , at ... UK 1/hr UK latitude

b. Oxidation constants at 25°C:

For 1O_2 (singlet oxygen), k_{ox} UK 1/M hr
For RO_2 (peroxy radical), k_{ox} UK 1/M hr

c. Five-day biochemical oxygen demand, BOD_5 ... UK mg/l

d. Biotransformation rate constant:

For bacterial transformation in water, k_b ... UK 1/hr
Specify culture UK

e. Hydrolysis rate constants:

For base-promoted process, k_B UK 1/M hr
For acid-promoted process, k_A UK 1/M hr
For neutral process, k_N UK 1/hr

f. Chemical reduction rate (specify conditions) UK

g. Other (such as spontaneous degradation) ... UK

☐ Mark (X) this box if you attach a continuation sheet.

PART B PARTITION COEFFICIENTS

- ✓ 5.02 a. Specify the half-life of the listed substance in the following media.

| <u>Media</u> | <u>Half-life (specify units)</u> |
|---------------|----------------------------------|
| Groundwater | UK |
| Atmosphere | UK |
| Surface water | UK |
| Soil | UK |

- b. Identify the listed substance's known transformation products that have a half-life greater than 24 hours.

| <u>CAS No.</u> | <u>Name</u> | <u>Half-life (specify units)</u> | <u>Media</u> |
|----------------|-------------|----------------------------------|--------------|
| UK | UK | UK | in UK |
| | | | in |
| | | | in |
| | | | in |

- ✓ 5.03 Specify the octanol-water partition coefficient, K_{ow} ... UK at 25°C
 Method of calculation or determination UK

- ✓ 5.04 Specify the soil-water partition coefficient, K_d UK at 25°C
 Soil type UK

- ✓ 5.05 Specify the organic carbon-water partition coefficient, K_{oc} UK at 25°C

- ✓ 5.06 Specify the Henry's Law Constant, H UK atm-m³/mole

☐ Mark (X) this box if you attach a continuation sheet.

- ✓ 5.07 List the bioconcentration factor (BCF) of the listed substance, the species for which it was determined, and the type of test used in deriving the BCF.

| <u>Bioconcentration Factor</u> | <u>Species</u> | <u>Test</u> ¹ |
|--------------------------------|----------------|--------------------------|
| UK | UK | UK |
| | | |
| | | |

¹Use the following codes to designate the type of test:

F = Flowthrough
S = Static

☐ Mark (X) this box if you attach a continuation sheet.

6.04 For each market listed below, state the quantity sold and the total sales value of the listed substance sold or transferred in bulk during the reporting year.

CBI

☐

| <u>Market</u> | <u>Quantity Sold or Transferred (kg/yr)</u> | <u>Total Sales Value (\$/yr)</u> |
|--|---|----------------------------------|
| Retail sales | _____ | _____ |
| Distribution -- Wholesalers | _____ | _____ |
| Distribution -- Retailers | _____ | _____ |
| Intra-company transfer | _____ | _____ |
| Repackagers | _____ | _____ |
| Mixture producers | _____ | _____ |
| Article producers | _____ | _____ |
| Other chemical manufacturers or processors | _____ | _____ |
| Exporters | _____ | _____ |
| Other (specify) | _____ | _____ |
| _____ | _____ | _____ |

6.05 Substitutes -- List all known commercially feasible substitutes that you know exist for the listed substance and state the cost of each substitute. A commercially feasible substitute is one which is economically and technologically feasible to use in your current operation, and which results in a final product with comparable performance in its end uses.

CBI

☐

| <u>Substitute</u> | <u>Cost (\$/kg)</u> |
|---|---------------------|
| By the beginning of 1990 we will no longer be using | \$ 3.15 (appr.) |
| TDI at this facility. We will be using an MDI system. | _____ |
| _____ | _____ |

☐ Mark (X) this box if you attach a continuation sheet.

SECTION 7 MANUFACTURING AND PROCESSING INFORMATION

General Instructions:

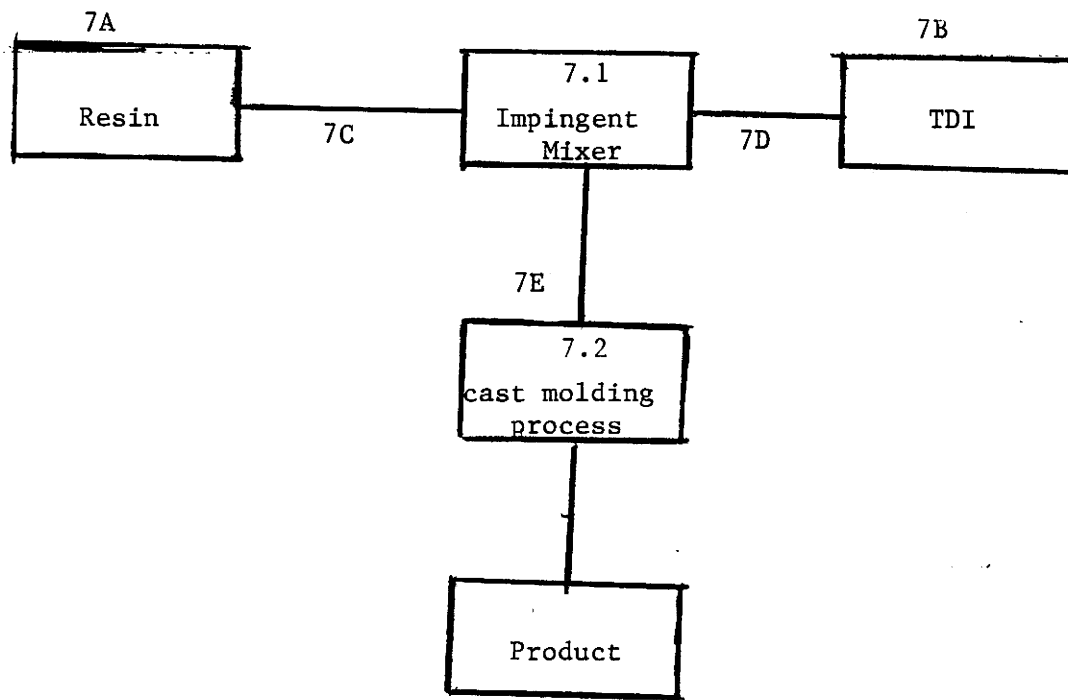
For questions 7.04-7.06, provide a separate response for each process block flow diagram provided in questions 7.01, 7.02, and 7.03. Identify the process type from which the information is extracted.

PART A MANUFACTURING AND PROCESSING PROCESS TYPE DESCRIPTION

✓ 7.01 In accordance with the instructions, provide a process block flow diagram showing the major (greatest volume) process type involving the listed substance.

CBI

☐ Process type Urethane Foaming Operation (High Pressure)



☒ Mark (X) this box if you attach a continuation sheet.

SECTION 7 MANUFACTURING AND PROCESSING INFORMATION

General Instructions:

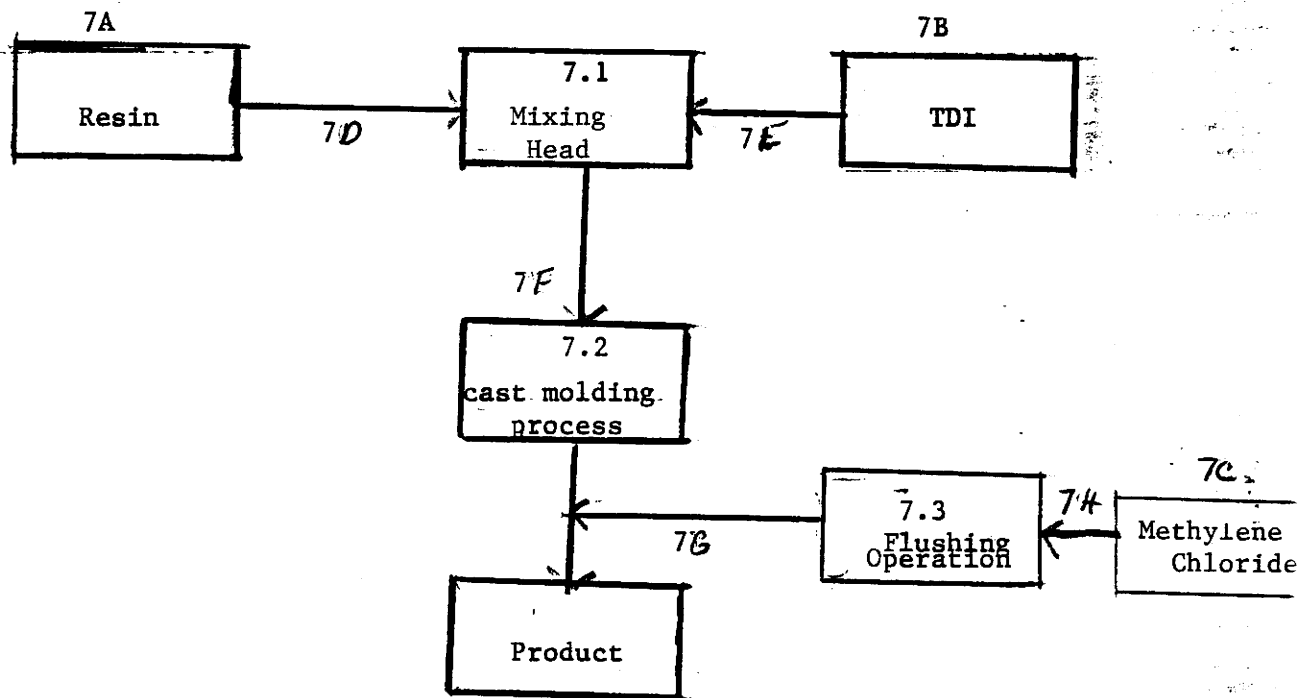
For questions 7.04-7.06, provide a separate response for each process block flow diagram provided in questions 7.01, 7.02, and 7.03. Identify the process type from which the information is extracted.

PART A MANUFACTURING AND PROCESSING PROCESS TYPE DESCRIPTION

✓ 7.01 In accordance with the instructions, provide a process block flow diagram showing the major (greatest volume) process type involving the listed substance.

CBI

☐ Process type Urethane Foam Operation (Low Pressure)



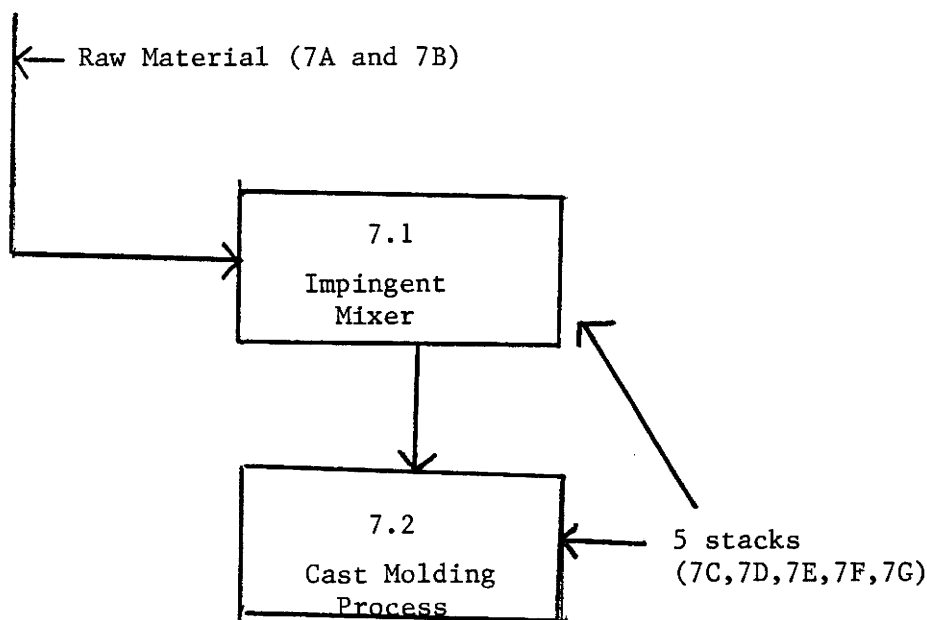
☐ Mark (X) this box if you attach a continuation sheet.

✓ 7.03 In accordance with the instructions, provide a process block flow diagram showing all process emission streams and emission points that contain the listed substance and which, if combined, would total at least 90 percent of all facility emissions if not treated before emission into the environment. If all such emissions are released from one process type, provide a process block flow diagram using the instructions for question 7.01. If all such emissions are released from more than one process type, provide a process block flow diagram showing each process type as a separate block.

CBI

☐ Process type Urethane Foam Operation (High-Pressure)

See Attached



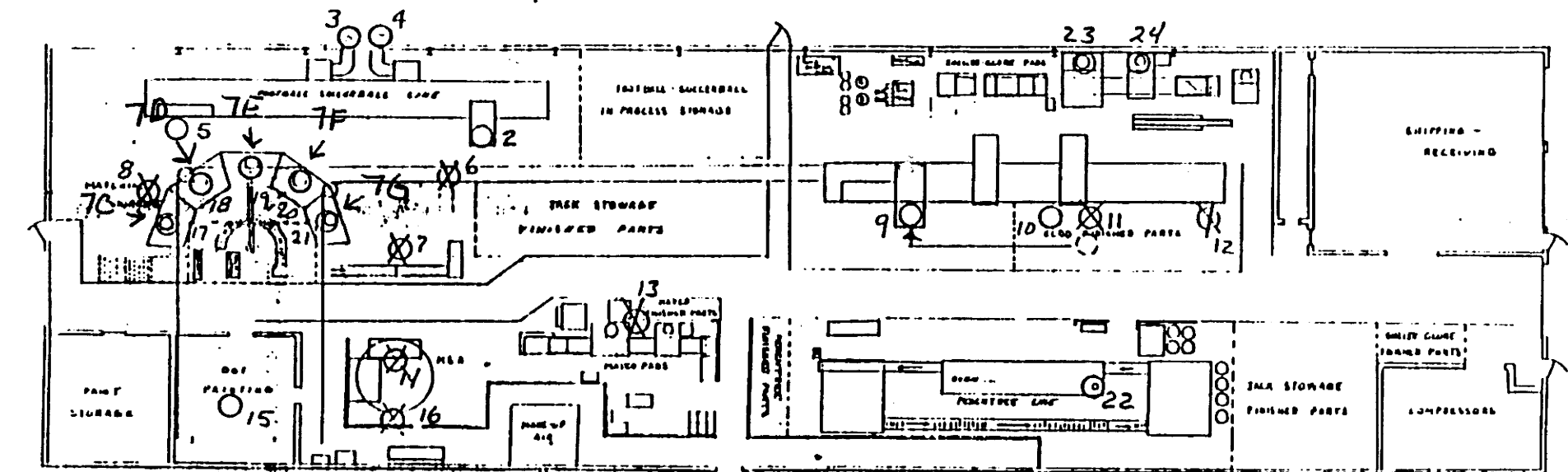
☐ Mark (X) this box if you attach a continuation sheet.

NOTE: All Voplex stack numbers are preceded with
2- for this building. Example:

3 = 2-3

Urethane Foam Operations

High Pressure



Existing certificates to operate
expiration date 11/88

Emission Pt: Voplex Stack #:

| | |
|-------|------|
| 00002 | 2-2 |
| 00003 | 2-3 |
| 00004 | 2-4 |
| 00005 | 2-5 |
| 00006 | 2-6 |
| 00007 | 2-7 |
| 00008 | 2-8 |
| 00009 | 2-9 |
| 00010 | 2-10 |
| 00012 | 2-12 |

○ — IN SERVICE

⊗ — OUT OF SERVICE

➔ — MOVED (7-5-84)

7.03.1

| | |
|------------------------|-------|
| BRICKYARD ROAD BLDG. 2 | |
| DATE | TIME |
| 11/12 | 11:12 |
| PAGE 2 | |

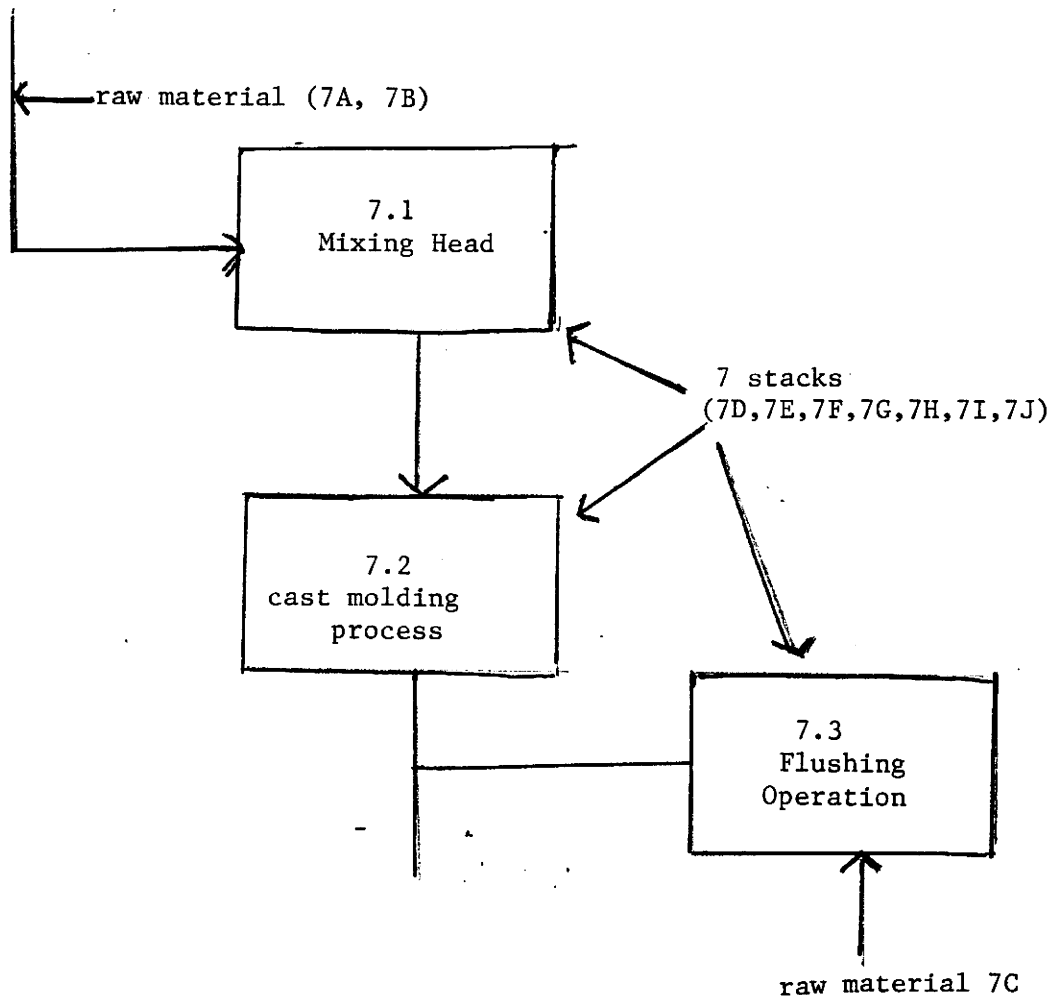
DEC ID # 3224000192

- 7.03 In accordance with the instructions, provide a process block flow diagram showing all process emission streams and emission points that contain the listed substance and which, if combined, would total at least 90 percent of all facility emissions if not treated before emission into the environment. If all such emissions are released from one process type, provide a process block flow diagram using the instructions for question 7.01. If all such emissions are released from more than one process type, provide a process block flow diagram showing each process type as a separate block.

CBI

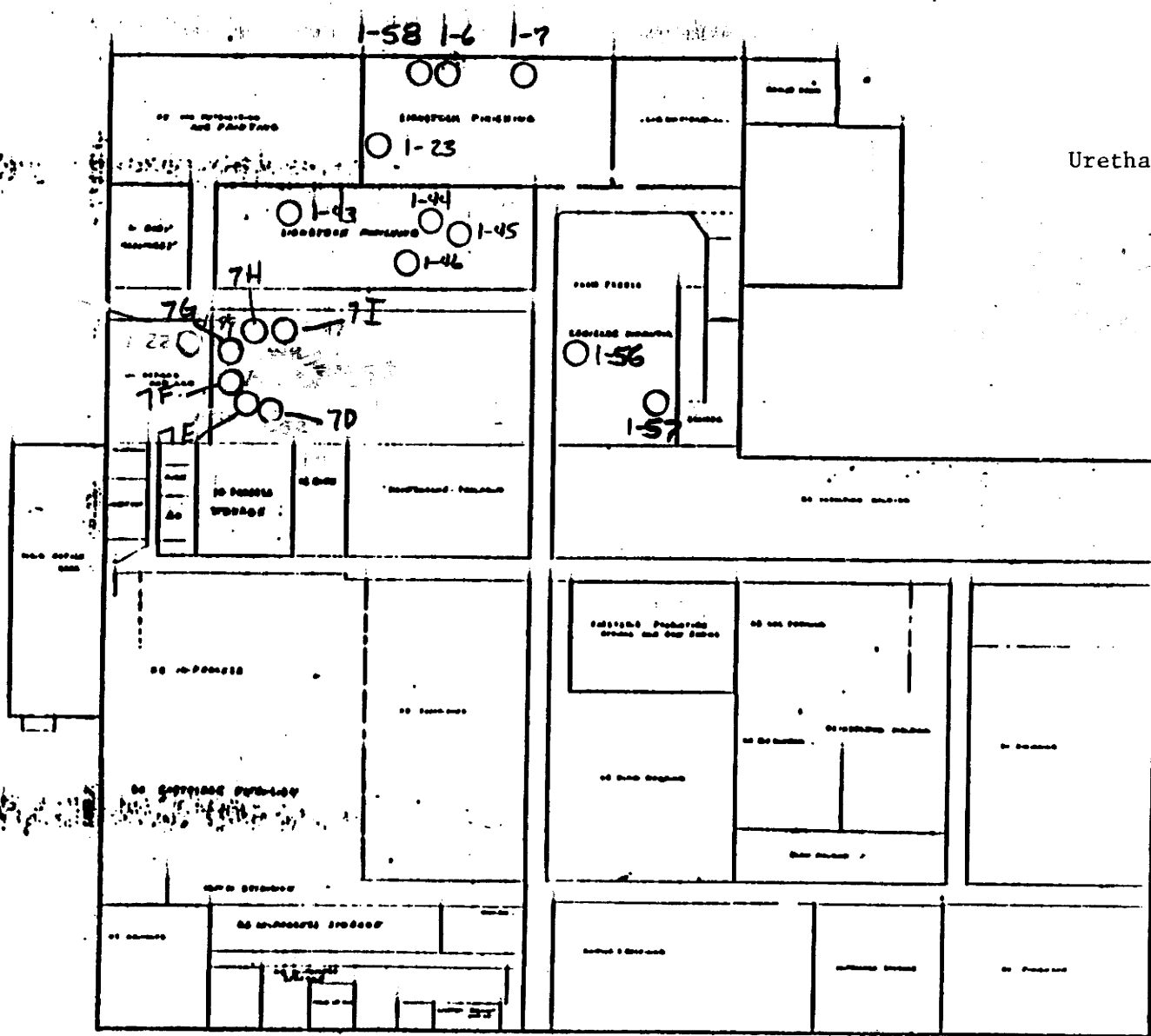
☐ Process type Urethane Foam Operation (Low Pressure)

See Attached Pages



☐ Mark (X) this box if you attach a continuation sheet.

4/18



Urethane Foam Operations

Low Pressure

7.03.2

| | | |
|----------------------------|-------|----------|
| DATE | TIME | BY |
| 4/18/78 | 10:00 | J. J. J. |
| NORTH STREET MAIN BUILDING | | |
| EQUIPMENT PLACES | | |

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E

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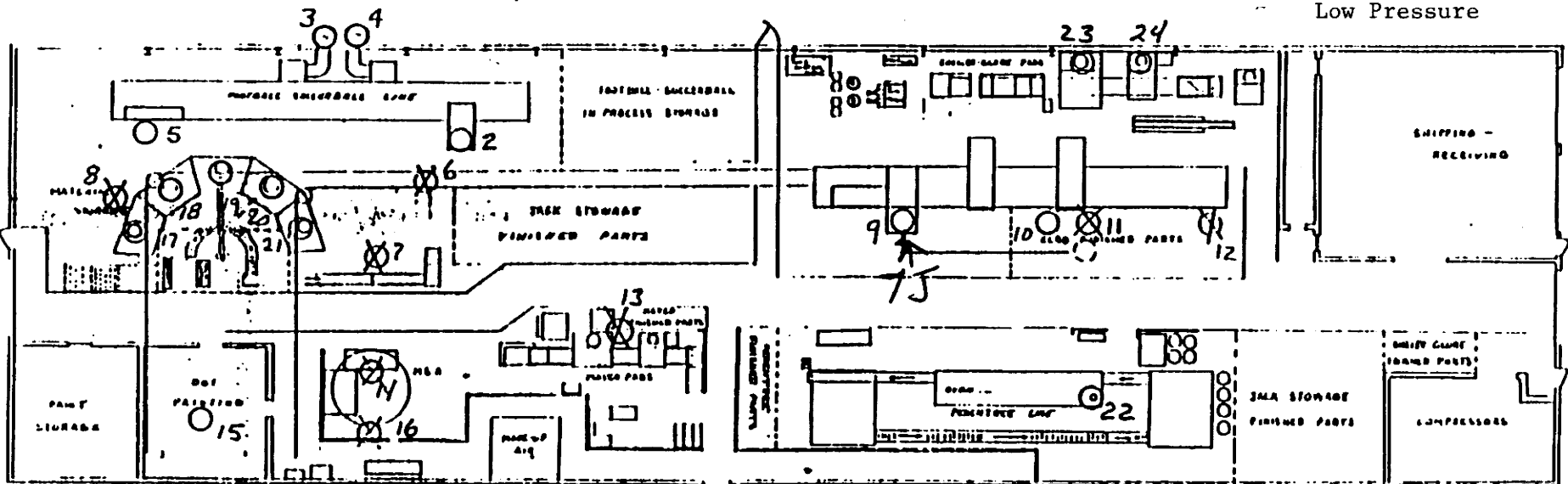
9

NOTE: All Voplex stack numbers are preceded with
2- for this building. Example:

3 = 2-3

Urethane Foam Operation

Low Pressure



Existing certificates to operate
expiration date 11/88

Emission Pt: Voplex Stack #:

| | |
|-------|------|
| 00002 | 2-2 |
| 00003 | 2-3 |
| 00004 | 2-4 |
| 00005 | 2-5 |
| 00006 | 2-6 |
| 00007 | 2-7 |
| 00008 | 2-8 |
| 00009 | 2-9 |
| 00010 | 2-10 |
| 00012 | 2-12 |

○ — IN SERVICE

⊗ — OUT OF SERVICE

→ — MOVED (7-5-86)

Dec ID # 322/000192

BRICKYARD ROAD BLDG. 2

| | | |
|----------|-------|-----|
| DATE | TIME | BY |
| 11/17/88 | 11:17 | ... |

- CBI**

☐ Process type Urethane Foam Operation (High Pressure)

[illegible]

☐ Mark (X) this box if you attach a continuation sheet.

7.04 Describe the typical equipment types for each unit operation identified in your process block flow diagram(s). If a process block flow diagram is provided for more than one process type, photocopy this question and complete it separately for each process type.

CBI

☐ Process type Urethane Foam Operation (Low Pressure)

| <u>Unit Operation ID Number</u> | <u>Typical Equipment Type</u> | <u>Operating Temperature Range (°C)</u> | <u>Operating Pressure Range (mm Hg)</u> | <u>Vessel Composition</u> |
|---|---------------------------------------|---|---|-------------------------------|
| <u>7.1</u> | <u>Mixing Head</u> | <u>UK</u> | <u>60#</u> | <u>stainless steel</u> |
| <u>7.2</u> | <u>cast mold</u> | <u>UK</u> | <u>UK</u> | <u>stainless steel</u> |
| <u>7.3</u> | <u>flushing oper.</u> | <u>room temp.</u> | <u>UK</u> | <u>stainless steel</u> |
| <u> </u> | <u> </u> | <u> </u> | <u> </u> | <u> </u> |
| <u> </u> | <u> </u> | <u> </u> | <u> </u> | <u> </u> |
| <u> </u> | <u> </u> | <u> </u> | <u> </u> | <u> </u> |
| <u> </u> | <u> </u> | <u> </u> | <u> </u> | <u> </u> |
| <u> </u> | <u> </u> | <u> </u> | <u> </u> | <u> </u> |
| <u> </u> | <u> </u> | <u> </u> | <u> </u> | <u> </u> |
| <u> </u> | <u> </u> | <u> </u> | <u> </u> | <u> </u> |
| <u> </u> | <u> </u> | <u> </u> | <u> </u> | <u> </u> |

☐ Mark (X) this box if you attach a continuation sheet.

- ✓ 7.05 Describe each process stream identified in your process block flow diagram(s). If a process block flow diagram is provided for more than one process type, photocopy this question and complete it separately for each process type.

CBI

☐ Process type Urethane Foam Operation (High Pressure)

| Process Stream ID Code | Process Stream Description | Physical State ¹ | Stream Flow (kg/yr) |
|---------------------------------|-------------------------------|-----------------------------|------------------------|
| 7C | Resin | OL | 85,809.7 |
| 7D | TDI | OL | 36,514.8 |
| 7E | Resin/TDI | SY | 122,324.5 |
| | | | |
| | | | |
| | | | |
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| | | | |
| | | | |

¹Use the following codes to designate the physical state for each process stream:

GC = Gas (condensable at ambient temperature and pressure)

GU = Gas (uncondensable at ambient temperature and pressure)

SO = Solid

SY = Sludge or slurry

AL = Aqueous liquid

OL = Organic liquid

IL = Immiscible liquid (specify phases, e.g., 90% water, 10% toluene)

☐ Mark (X) this box if you attach a continuation sheet.

- ✓ 7.05 Describe each process stream identified in your process block flow diagram(s). If a process block flow diagram is provided for more than one process type, photocopy this question and complete it separately for each process type.

CBI

☐ Process type Urethane Foam Operation (Low Pressure)

| Process Stream ID Code | Process Stream Description | Physical State ¹ | Stream Flow (kg/yr) |
|------------------------|-------------------------------------|-----------------------------|---------------------|
| <u>7 O</u> | <u>Resin</u> | <u>OL</u> | <u>12,192.8</u> |
| <u>7 E</u> | <u>TDI</u> | <u>OL</u> | <u>4,762.8</u> |
| <u>7 F</u> | <u>Resin/TDI</u> | <u>SY</u> | <u>16,955.6</u> |
| <u>7 G</u> | <u>resin/TDI/Methylene Chloride</u> | <u>OL</u> | <u>UK</u> |
| <u>7 H</u> | <u>Methylene Chloride</u> | <u>OL</u> | <u>UK</u> |
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |

¹Use the following codes to designate the physical state for each process stream:

GC = Gas (condensable at ambient temperature and pressure)
 GU = Gas (uncondensable at ambient temperature and pressure)
 SO = Solid
 SY = Sludge or slurry
 AL = Aqueous liquid
 OL = Organic liquid
 IL = Immiscible liquid (specify phases, e.g., 90% water, 10% toluene)

☐ Mark (X) this box if you attach a continuation sheet.

7.06 Characterize each process stream identified in your process block flow diagram(s). If a process block flow diagram is provided for more than one process type, photocopy this question and complete it separately for each process type. (Refer to the CBI instructions for further explanation and an example.)

☐ Process type Urethane Foam Operation (High Pressure)

| a. | b... | c. | d. | e. |
|------------------------------|--------------------------------|--|--------------------------------|---|
| Process Stream ID Code | Known Compounds ¹ | Concen- trations ^{2,3} (% or ppm) | Other Expected Compounds | Estimated Concentrations (% or ppm) |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | SEE MATERIAL SAFETY DATA SHEET | | | |
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7.06 continued below

☐ Mark (X) this box if you attach a continuation sheet.

7.06 (continued)

¹For each additive package introduced into a process stream, specify the compounds that are present in each additive package, and the concentration of each component. Assign an additive package number to each additive package and list this number in column b. (Refer to the instructions for further explanation and an example. Refer to the glossary for the definition of additive package.)

| Additive Package Number | Components of Additive Package | Concentrations (% or ppm) |
|----------------------------|-----------------------------------|------------------------------|
| <u>1</u> | <u>OK</u> | |
| | | |
| | | |
| <u>2</u> | | |
| | | |
| | | |
| <u>3</u> | | |
| | | |
| | | |
| <u>4</u> | | |
| | | |
| | | |
| <u>5</u> | | |
| | | |
| | | |

²Use the following codes to designate how the concentration was determined:

A = Analytical result

E = Engineering judgement/calculation

³Use the following codes to designate how the concentration was measured:

V = Volume

W = Weight

☐ Mark (X) this box if you attach a continuation sheet.

- ✓ 7.06 Characterize each process stream identified in your process block flow diagram(s).
If a process block flow diagram is provided for more than one process type, photocopy this question and complete it separately for each process type. (Refer to the CBI instructions for further explanation and an example.)

☐ Process type Urethane Foam Operation (Low Pressure)

| a. | b. | c. | d. | e. |
|------------------------------|--------------------------------|--|--------------------------------|---|
| Process Stream ID Code | Known Compounds ¹ | Concen- trations ^{2,3} (% or ppm) | Other Expected Compounds | Estimated Concentrations (% or ppm) |
| | | | | |
| | | | | |
| | | | | |
| | SEE MATERIAL SAFETY DATA SHEET | | | |
| | | | | |
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7.06 continued below

☐ Mark (X) this box if you attach a continuation sheet.

7.06 (continued)

¹For each additive package introduced into a process stream, specify the compounds that are present in each additive package, and the concentration of each component. Assign an additive package number to each additive package and list this number in column b. (Refer to the instructions for further explanation and an example. Refer to the glossary for the definition of additive package.)

| Additive Package Number | Components of Additive Package | Concentrations (% or ppm) |
|----------------------------|-----------------------------------|------------------------------|
| 1 | N/A | |
| | | |
| | | |
| 2 | | |
| | | |
| | | |
| 3 | | |
| | | |
| | | |
| 4 | | |
| | | |
| | | |
| 5 | | |
| | | |
| | | |

²Use the following codes to designate how the concentration was determined:

A = Analytical result

E = Engineering judgement/calculation

³Use the following codes to designate how the concentration was measured:

V = Volume

W = Weight

☐ Mark (X) this box if you attach a continuation sheet.

SECTION 8 RESIDUAL TREATMENT GENERATION, CHARACTERIZATION, TRANSPORTATION, AND
MANAGEMENT

General Instructions:

For questions 8.04-8.06, provide a separate response for each residual treatment block flow diagram provided in question 8.01, 8.02 or 8.03. Identify the process type from which the information is extracted.

For questions 8.05-8.33, the Stream Identification Codes are those process streams listed in either the Section 7 or Section 8 block flow diagrams which contain residuals for each applicable waste management method.

For questions 8.07-8.33, if residuals are combined before they are handled, list those Stream Identification Codes on the same line.

Questions 8.09-8.33 refer to the waste management activities involving the residuals identified in either the Section 7 or Section 8 block flow diagrams. Not all Stream Identification Codes used in the sample answers (e.g., for the incinerator questions) have corresponding process streams identified in the block flow diagram(s). These Stream Identification codes are for illustrative purposes only.

For questions 8.11-8.33, if you have provided the information requested on one of the EPA Office of Solid Waste surveys listed below within the three years prior to your reporting year, you may submit a copy or reasonable facsimile in lieu of answering those questions which the survey addresses. The applicable surveys are: (1) Hazardous Waste Treatment, Storage, Disposal, and Recycling Survey; (2) Hazardous Waste Generator Survey; or (3) Subtitle D Industrial Facility Mail Survey.

☐ Mark (X) this box if you attach a continuation sheet.

PART A RESIDUAL TREATMENT PROCESS DESCRIPTION

- ✓ 8.01 In accordance with the instructions, provide a residual treatment block flow diagram which describes the treatment process used for residuals identified in question 7.01.

CBI

☐ Process type Urethane Foam Operation (High Pressure)

Piston removes waste which is cured foam. No treatable waste.

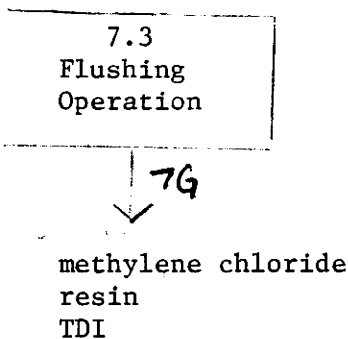
☐ Mark (X) this box if you attach a continuation sheet.

PART A RESIDUAL TREATMENT PROCESS DESCRIPTION

✓ 8.01 In accordance with the instructions, provide a residual treatment block flow diagram which describes the treatment process used for residuals identified in question 7.01.

CBI

☐ Process type Urethane Foam Operation (Low Pressure)



☐ Mark (X) this box if you attach a continuation sheet.

8.05 Characterize each process stream identified in your residual treatment block flow diagram(s). If a residual treatment block flow diagram is provided for more than one process type, photocopy this question and complete it separately for each process type. (Refer to the instructions for further explanation and an example.)

[illegible]

☐ Mark (X) this box if you attach a continuation sheet.

8.05 (continued)

¹Use the following codes to designate the type of hazardous waste:

I = Ignitable
C = Corrosive
R = Reactive
E = EP toxic
T = Toxic
H = Acutely hazardous

²Use the following codes to designate the physical state of the residual:

GC = Gas (condensable at ambient temperature and pressure)
GU = Gas (uncondensable at ambient temperature and pressure)
SO = Solid
SY = Sludge or slurry
AL = Aqueous liquid
OL = Organic liquid
IL = Immiscible liquid (specify phases, e.g., 90% water, 10% toluene)

8.05 continued below

☐ Mark (X) this box if you attach a continuation sheet.

8.05 (continued)

high pressure

³For each additive package introduced into a process stream, specify the compounds that are present in each additive package, and the concentration of each component. Assign an additive package number to each additive package and list this number in column d. (Refer to the instructions for further explanation and an example. Refer to the glossary for the definition of additive package.)

| Additive Package Number | Components of Additive Package | Concentrations (% or ppm) |
|----------------------------|-----------------------------------|------------------------------|
| <u>1</u> | <u>OK</u> | |
| | | |
| | | |
| <u>2</u> | | |
| | | |
| | | |
| <u>3</u> | | |
| | | |
| | | |
| <u>4</u> | | |
| | | |
| | | |
| <u>5</u> | | |
| | | |
| | | |

⁴Use the following codes to designate how the concentration was determined:

A = Analytical result

E = Engineering judgement/calculation

8.05 continued below

☐ Mark (X) this box if you attach a continuation sheet.

✓ 8.05 (continued)

high pressure

⁵Use the following codes to designate how the concentration was measured:

V = Volume

W = Weight

⁶Specify the analytical test methods used and their detection limits in the table below. Assign a code to each test method used and list those codes in column e.

| <u>Code</u> | <u>Method</u> | <u>Detection Limit</u> <u>(± ug/l)</u> |
|-------------|---------------|---|
| <u>1</u> | N/A | |
| <u>2</u> | | |
| <u>3</u> | | |
| <u>4</u> | | |
| <u>5</u> | | |
| <u>6</u> | | |

☐ Mark (X) this box if you attach a continuation sheet.

³ For each additive package introduced into a process stream, specify the compounds that are present in each additive package, and the concentration of each component. Assign an additive package number to each additive package and list this number in column d. (Refer to the instructions for further explanation and an example. Refer to the glossary for the definition of additive package.)

| Additive Package Number | Components of Additive Package | Concentrations (% or ppm) |
|----------------------------|-----------------------------------|------------------------------|
| 1 | OK | |
| | | |
| | | |
| 2 | | |
| | | |
| | | |
| 3 | | |
| | | |
| | | |
| 4 | | |
| | | |
| | | |
| 5 | | |
| | | |
| | | |

⁴ Use the following codes to designate how the concentration was determined:

A = Analytical result

E = Engineering judgement/calculation

8.05 continued below

☐ Mark (X) this box if you attach a continuation sheet.

8.05 (continued)

Low Pressure

⁵Use the following codes to designate how the concentration was measured:

V = Volume

W = Weight

⁶Specify the analytical test methods used and their detection limits in the table below. Assign a code to each test method used and list those codes in column e.

| <u>Code</u> | <u>Method</u> | <u>Detection Limit</u> <u>(± ug/l)</u> |
|-------------|---------------|---|
| <u>1</u> | N/A | |
| <u>2</u> | | |
| <u>3</u> | | |
| <u>4</u> | | |
| <u>5</u> | | |
| <u>6</u> | | |

☐ Mark (X) this box if you attach a continuation sheet.

N/A

| a. | b. | c. | d. | e. | | f. | g. |
|----------------------|---|---|-----------------------------------|-------------------------------|----------|---|-------------------------------------|
| Stream ID Code | Waste Description Code ¹ | Management Method Code ² | Residual Quantities (kg/yr) | Management of Residual (%) | | Costs for Off-Site Management (per kg) | Changes in Management Methods |
| | | | | On-Site | Off-Site | | |
| | | | | | | | |
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²Use the codes provided in Exhibit 8-2 to designate the management methods

58

CBI

[illegible]

²Use the codes provided in Exhibit 8-2 to designate the management methods

58

EXHIBIT 8-1.
(Refers to question 8.06(b))

WASTE DESCRIPTION CODES

These waste description codes were developed specifically for this survey to supplement the descriptions listed with the RCRA and other waste codes. (These waste description codes are not regulatory definitions.)

WASTE DESCRIPTION CODES FOR HAZARDOUS WASTE DESCRIBED BY A SINGLE RCRA F, K, P, OR U WASTE CODE

| | | |
|--|--|---|
| A01 Spent solvent (F001-F005, K086) | A06 Contaminated soil or cleanup residue | A10 Incinerator ash |
| A02 Other organic liquid (F001-F005, K086) | A07 Other F or K waste, exactly as described | A11 Solidified treatment residue |
| A03 Still bottom (F001-F005, K086) | A08 Concentrated off-spec or discarded product | A12 Other treatment residue (specify in "Facility Notes") |
| A04 Other organic sludge (F001-F005, K086) | A09 Empty containers | A13 Other untreated waste (specify in "Facility Notes") |
| A05 Wastewater or aqueous mixture | | |

"Exactly as described" means that the waste matches the description of the RCRA waste-code.

INORGANIC LIQUIDS—Waste that is primarily inorganic and highly fluid (e.g., aqueous), with low suspended inorganic solids and low organic content.

- B01 Aqueous waste with low solvents
- B02 Aqueous waste with low other toxic organics
- B03 Spent acid with metals
- B04 Spent acid without metals
- B05 Acidic aqueous waste
- B06 Caustic solution with metals but no cyanides
- B07 Caustic solution with metals and cyanides
- B08 Caustic solution with cyanides but no metals
- B09 Spent caustic
- B10 Caustic aqueous waste
- B11 Aqueous waste with reactive sulfides
- B12 Aqueous waste with other reactives (e.g., explosives)
- B13 Other aqueous waste with high dissolved solids
- B14 Other aqueous waste with low dissolved solids
- B15 Scrubber water
- B16 Leachate
- B17 Waste liquid mercury
- B18 Other inorganic liquid (specify in "Facility Notes")

INORGANIC SLUDGES—Waste that is primarily inorganic, with moderate-to-high water content and low organic content; pumpable.

- B19 Lime sludge without metals
- B20 Lime sludge with metals/metal hydroxide sludge
- B21 Wastewater treatment sludge with toxic organics
- B22 Other wastewater treatment sludge
- B23 Untreated plating sludge without cyanides
- B24 Untreated plating sludge with cyanides
- B25 Other sludge with cyanides
- B26 Sludge with reactive sulfides
- B27 Sludge with other reactives
- B28 Degreasing sludge with metal scale or filings
- B29 Air pollution control device sludge (e.g., fly ash, wet scrubber sludge)
- B30 Sediment or lagoon dragout contaminated with organics
- B31 Sediment or lagoon dragout contaminated with inorganics only

- B32 Drilling mud
- B33 Asbestos slurry or sludge
- B34 Chloride or other brine sludge
- B35 Other inorganic sludge (specify in "Facility Notes")

INORGANIC SOLIDS—Waste that is primarily inorganic and solid, with low organic content and low-to-moderate water content; not pumpable.

- B36 Soil contaminated with organics
- B37 Soil contaminated with inorganics only
- B38 Ash, slag, or other residue from incineration of wastes
- B39 Other "dry" ash, slag, or thermal residue
- B40 "Dry" lime or metal hydroxide solids chemically "fixed"
- B41 "Dry" lime or metal hydroxide solids not "fixed"
- B42 Metal scale, filings, or scrap
- B43 Empty or crushed metal drums or containers
- B44 Batteries or battery parts, casings, cores
- B45 Spent solid filters or adsorbents
- B46 Asbestos solids and debris
- B47 Metal-cyanide salts/chemicals
- B48 Reactive cyanide salts/chemicals
- B49 Reactive sulfide salts/chemicals
- B50 Other reactive salts/chemicals
- B51 Other metal salts/chemicals
- B52 Other waste inorganic chemicals
- B53 Lab packs of old chemicals only
- B54 Lab packs of debris only
- B55 Mixed lab packs
- B56 Other inorganic solids (specify in "Facility Notes")

INORGANIC GASES—Waste that is primarily inorganic with a low organic content and is a gas at atmospheric pressure.

- B57 Inorganic gases

ORGANIC LIQUIDS—Waste that is primarily organic and is highly fluid, with low inorganic solids content and low-to-moderate water content.

- B58 Concentrated solvent-water solution
- B59 Halogenated (e.g., chlorinated) solvent
- B60 Nonhalogenated solvent

- B61 Halogenated/nonhalogenated solvent mixture
- B62 Oil-water emulsion or mixture
- B63 Waste oil
- B64 Concentrated aqueous solution of other organics
- B65 Concentrated phenolics
- B66 Organic paint, ink, lacquer, or varnish
- B67 Adhesives or epoxies
- B68 Paint thinner or petroleum distillates
- B69 Reactive or polymerizable organic liquid
- B70 Other organic liquid (specify in "Facility Notes")

ORGANIC SLUDGES—Waste that is primarily organic, with low-to-moderate inorganic solids content and water content; pumpable.

- B71 Still bottoms of halogenated (e.g., chlorinated) solvents or other organic liquids
- B72 Still bottoms of nonhalogenated solvents or other organic liquids
- B73 Oily sludge
- B74 Organic paint or ink sludge
- B75 Reactive or polymerizable organics
- B76 Resins, tars, or tarry sludge
- B77 Biological treatment sludge
- B78 Sewage or other untreated biological sludge
- B79 Other organic sludge (specify in "Facility Notes")

ORGANIC SOLIDS—Waste that is primarily organic and solid, with low-to-moderate inorganic content and water content; not pumpable.

- B80 Halogenated pesticide solid
- B81 Nonhalogenated pesticide solid
- B82 Solid resins or polymerized organics
- B83 Spent carbon
- B84 Reactive organic solid
- B85 Empty fiber or plastic containers
- B86 Lab packs of old chemicals only
- B87 Lab packs of debris only
- B88 Mixed lab packs
- B89 Other halogenated organic solid
- B90 Other nonhalogenated organic solid

ORGANIC GASES—Waste that is primarily organic with low-to-moderate inorganic content and is a gas at atmospheric pressure.

- B91 Organic gases

EXHIBIT 8-2.
(Refers to question 8.06(c))

MANAGEMENT METHODS

- M1 = Discharge to publicly owned wastewater treatment works
M2 = Discharge to surface water under NPDES
M3 = Discharge to off-site, privately owned wastewater treatment works
M4 = Scrubber: a) caustic; b) water; c) other
M5 = Vent to: a) atmosphere; b) flare; c) other (specify) _____
M6 = Other (specify) _____

TREATMENT AND RECYCLING

Incineration/thermal treatment

- 1I Liquid injection
2I Rotary or rocking kiln
3I Rotary kiln with a liquid injection unit
4I Two stage
5I Fixed hearth
6I Multiple hearth
7I Fluidized bed
8I Infrared
9I Fume/vapor
10I Pyrolytic destructor
11I Other incineration/thermal treatment

Reuse as fuel

- 1RF Cement kiln
2RF Aggregate kiln
3RF Asphalt kiln
4RF Other kiln
5RF Blast furnace
6RF Sulfur recovery furnace
7RF Smelting, melting, or refining furnace
8RF Coke oven
9RF Other industrial furnace
10RF Industrial boiler
11RF Utility boiler
12RF Process heater
13RF Other reuse as fuel unit

Fuel Blending

- 1FB Fuel blending

Solidification

- 1S Cement or cement/silicate processes
2S Pozzolanic processes
3S Asphaltic processes
4S Thermoplastic techniques
5S Organic polymer techniques
6S Jacketing (macro-encapsulation)
7S Other solidification

Recovery of solvents and liquid organics for reuse

- 1SR Fractionation
2SR Batch still distillation
3SR Solvent extraction
4SR Thin-film evaporation
5SR Filtration
6SR Phase separation
7SR Dessication
8SR Other solvent recovery

Recovery of metals

- 1MR Activated carbon (for metals recovery)
2MR Electrodialysis (for metals recovery)
3MR Electrolytic metal recovery
4MR Ion exchange (for metals recovery)
5MR Reverse osmosis (for metals recovery)
6MR Solvent extraction (for metals recovery)
7MR Ultrafiltration (for metals recovery)
8MR Other metals recovery

Wastewater Treatment

After each wastewater treatment type listed below (1WT - 66WT) specify a) tank; or b) surface impoundment (i.e., 63WTa)

Equalization

- 1WT Equalization

Cyanide oxidation

- 2WT Alkaline chlorination
3WT Ozone
4WT Electrochemical
5WT Other cyanide oxidation

General oxidation (including disinfection)

- 6WT Chlorination
7WT Ozonation
8WT UV radiation
9WT Other general oxidation

Chemical precipitation¹

- 10WT Lime
11WT Sodium hydroxide
12WT Soda ash
13WT Sulfide
14WT Other chemical precipitation

Chromium reduction

- 15WT Sodium bisulfite
16WT Sulfur dioxide

EXHIBIT 8-2. (continued)

MANAGEMENT METHODS

| | |
|--|--|
| 17WT Ferrous sulfate | 48WT Coalescing plate separation |
| 18WT Other chromium reduction | 49WT Other oil skimming |
| Complexed metals treatment (other than chemical precipitation by pH adjustment) | Other liquid phase separation |
| 19WT Complexed metals treatment | 50WT Decanting |
| | 51WT Other liquid phase separation |
| Emulsion breaking | Biological treatment |
| 20WT Thermal | 52WT Activated sludge |
| 21WT Chemical | 53WT Fixed film-trickling filter |
| 22WT Other emulsion breaking | 54WT Fixed film-rotating contactor |
| | 55WT Lagoon or basin, aerated |
| Adsorption | 56WT Lagoon, facultative |
| 23WT Carbon adsorption | 57WT Anaerobic |
| 24WT Ion exchange | 58WT Other biological treatment |
| 25WT Resin adsorption | Other wastewater treatment |
| 26WT Other adsorption | 59WT Wet air oxidation |
| | 60WT Neutralization |
| Stripping | 61WT Nitrification |
| 27WT Air stripping | 62WT Denitrification |
| 28WT Steam stripping | 63WT Flocculation and/or coagulation |
| 29WT Other stripping | 64WT Settling (clarification) |
| | 65WT Reverse osmosis |
| Evaporation | 66WT Other wastewater treatment |
| 30WT Thermal | |
| 31WT Solar | OTHER WASTE TREATMENT |
| 32WT Vapor recompression | 1TR Other treatment |
| 33WT Other evaporation | 2TR Other recovery for reuse |
| | |
| Filtration | ACCUMULATION |
| 34WT Diatomaceous earth | 1A Containers |
| 35WT Sand | 2A Tanks |
| 36WT Multimedia | |
| 37WT Other filtration | STORAGE |
| | 1ST Container (i.e., barrel, drum) |
| Sludge dewatering | 2ST Tank |
| 38WT Gravity thickening | 3ST Waste pile |
| 39WT Vacuum filtration | 4ST Surface impoundment |
| 40WT Pressure filtration (belt, plate and frame, or leaf) | 5ST Other storage |
| 41WT Centrifuge | |
| 42WT Other sludge dewatering | DISPOSAL |
| | 1D Landfill |
| Air flotation | 2D Land treatment |
| 43WT Dissolved air flotation | 3D Surface impoundment (to be closed as a landfill) |
| 44WT Partial aeration | 4D Underground injection well |
| 45WT Air dispersion | |
| 46WT Other air flotation | |
| | |
| Oil skimming | |
| 47WT Gravity separation | |

¹Chemical precipitation is a treatment operation whereby the pH of a waste is adjusted to the range necessary for removal (precipitation) of contaminants. However, if the pH is adjusted solely to achieve a neutral pH, THE OPERATION SHOULD BE CONSIDERED NEUTRALIZATION (60WT).

✓ 8.22 Describe the combustion chamber design parameters for each of the three largest (by capacity) incinerators that are used on-site to burn the residuals identified in your process block or residual treatment block flow diagram(s).

☐

| <u>Incinerator</u> | <u>Combustion Chamber Temperature (°C)</u> | | <u>Location of Temperature Monitor</u> | | <u>Residence Time In Combustion Chamber (seconds)</u> | |
|--------------------|--|------------------|--|------------------|---|------------------|
| | <u>Primary</u> | <u>Secondary</u> | <u>Primary</u> | <u>Secondary</u> | <u>Primary</u> | <u>Secondary</u> |
| <u>1</u> | _____ | _____ | _____ | _____ | _____ | _____ |
| <u>2</u> | _____ | _____ | _____ | _____ | _____ | _____ |
| <u>3</u> | _____ | _____ | _____ | _____ | _____ | _____ |

Indicate if Office of Solid Waste survey has been submitted in lieu of response by circling the appropriate response.

Yes 1

No 2

✓ 8.23 Complete the following table for the three largest (by capacity) incinerators that are used on-site to burn the residuals identified in your process block or residual treatment block flow diagram(s). N/A

☐

| <u>Incinerator</u> | <u>Air Pollution Control Device¹</u> | <u>Types of Emissions Data Available</u> |
|--------------------|---|--|
| <u>1</u> | _____ | _____ |
| <u>2</u> | _____ | _____ |
| <u>3</u> | _____ | _____ |

Indicate if Office of Solid Waste survey has been submitted in lieu of response by circling the appropriate response.

Yes 1

No 2

¹Use the following codes to designate the air pollution control device:

S = Scrubber (include type of scrubber in parenthesis)

E = Electrostatic precipitator

O = Other (specify) _____

☐ Mark (X) this box if you attach a continuation sheet.

SECTION 9 WORKER EXPOSURE

General Instructions:

Questions 9.03-9.25 apply only to those processes and workers involved in manufacturing or processing the listed substance. Do not include workers involved in residual waste treatment unless they are involved in this treatment process on a regular basis (i.e., exclude maintenance workers, construction workers, etc.).

☐ Mark (X) this box if you attach a continuation sheet.

PART A EMPLOYMENT AND POTENTIAL EXPOSURE PROFILE

9.01 Mark (X) the appropriate column to indicate whether your company maintains records on the following data elements for hourly and salaried workers. Specify for each data element the year in which you began maintaining records and the number of years the records for that data element are maintained. (Refer to the instructions for further explanation and an example.)

☐ CBI

| Data Element | Data are Maintained for: | | Year in Which Data Collection Began | Number of Years Records Are Maintained |
|---|--------------------------|---------------------|---|--|
| | Hourly Workers | Salaried Workers | | |
| Date of hire | <u>X</u> | <u>X</u> | <u>1971</u> | <u>7yrs after terminatio</u> |
| Age at hire | <u>X</u> | <u>X</u> | <u>1971</u> | <u>7yrs after terminatio</u> |
| Work history of individual before employment at your facility | <u>NA</u> | <u>X</u> | <u>1971</u> | <u>7yrs after terminatio</u> |
| Sex | <u>X</u> | <u>X</u> | <u>1971</u> | <u>7yrs after terminatio</u> |
| Race | <u>NA</u> | <u>NA</u> | <u>NA</u> | <u>NA</u> |
| Job titles | <u>X</u> | <u>X</u> | <u>1971</u> | <u>7yrs after terminatio</u> |
| Start date for each job title | <u>X</u> | <u>X</u> | <u>1971</u> | <u>7yrs after terminatio</u> |
| End date for each job title | <u>X</u> | <u>X</u> | <u>1971</u> | <u>7yrs after terminatio</u> |
| Work area industrial hygiene monitoring data | <u>X</u> | <u>NA</u> | <u>1984</u> | <u>40yrs</u> |
| Personal employee monitoring data | <u>X</u> | <u>NA</u> | <u>1984</u> | <u>40yrs</u> |
| Employee medical history | <u>NA</u> | <u>NA</u> | <u>NA</u> | <u>NA</u> |
| Employee smoking history | <u>NA</u> | <u>NA</u> | <u>NA</u> | <u>NA</u> |
| Accident history | <u>X</u> | <u>X</u> | <u>1971</u> | <u>7yrs after terminatio</u> |
| Retirement date | <u>X</u> | <u>X</u> | <u>1971</u> | <u>7yrs after terminatio</u> |
| Termination date | <u>X</u> | <u>X</u> | <u>1971</u> | <u>7yrs after terminatio</u> |
| Vital status of retirees | <u>NA</u> | <u>NA</u> | <u>NA</u> | <u>NA</u> |
| Cause of death data | <u>NA</u> | <u>NA</u> | <u>NA</u> | <u>NA</u> |

☐ Mark (X) this box if you attach a continuation sheet.

9.02 In accordance with the instructions, complete the following table for each activity in which you engage.

CBI

☐

| a. | b. | c. | d. | e. |
|--|-------------------------|---------------------------------|--------------------------|-------------------------------|
| <u>Activity</u> | <u>Process Category</u> | <u>Yearly Quantity (kg)</u> | <u>Total Workers</u> | <u>Total Worker-Hours</u> |
| Manufacture of the listed substance | Enclosed | 0 | 0 | 0 |
| | Controlled Release | 0 | 0 | 0 |
| | Open | 0 | 0 | 0 |
| On-site use as reactant | Enclosed | 41,277.4 | 32 | 2,680. |
| | Controlled Release | 0 | 0 | 0 |
| | Open | 0 | 0 | 0 |
| On-site use as nonreactant | Enclosed | 0 | 0 | 0 |
| | Controlled Release | 0 | 0 | 0 |
| | Open | 0 | 0 | 0 |
| On-site preparation of products | Enclosed | 0 | 0 | 0 |
| | Controlled Release | 0 | 0 | 0 |
| | Open | 0 | 0 | 0 |

☐ Mark (X) this box if you attach a continuation sheet.

9.03 Provide a descriptive job title for each labor category at your facility that encompasses workers who may potentially come in contact with or be exposed to the listed substance.

CBI

☐

Labor Category

Descriptive Job Title

A

foam machine operator (lead set up)

B

pouring machine operator

C

general laborer

D

Supervisor

E

F

G

H

I

J

☐ Mark (X) this box if you attach a continuation sheet.

-
- ✓ 9.04 In accordance with the instructions, provide your process block flow diagram(s) and indicate associated work areas.

CBI

☐ Process type

See 7.01 Attached Pages

☐ Mark (X) this box if you attach a continuation sheet.

SECTION 7 MANUFACTURING AND PROCESSING INFORMATION

General Instructions:

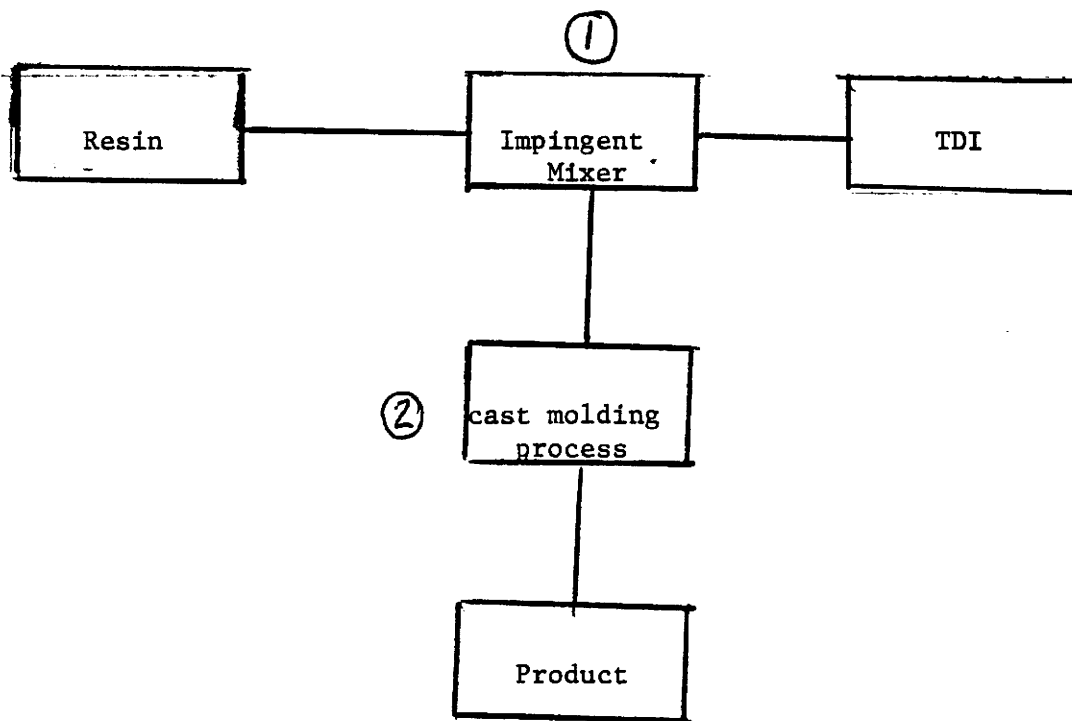
For questions 7.04-7.06, provide a separate response for each process block flow diagram provided in questions 7.01, 7.02, and 7.03. Identify the process type from which the information is extracted.

PART A MANUFACTURING AND PROCESSING PROCESS TYPE DESCRIPTION

7.01 In accordance with the instructions, provide a process block flow diagram showing the major (greatest volume) process type involving the listed substance.

CBI

☐ Process type Urethane Foam Process (High Pressure)



☐ Mark (X) this box if you attach a continuation sheet.

SECTION 7 MANUFACTURING AND PROCESSING INFORMATION

General Instructions:

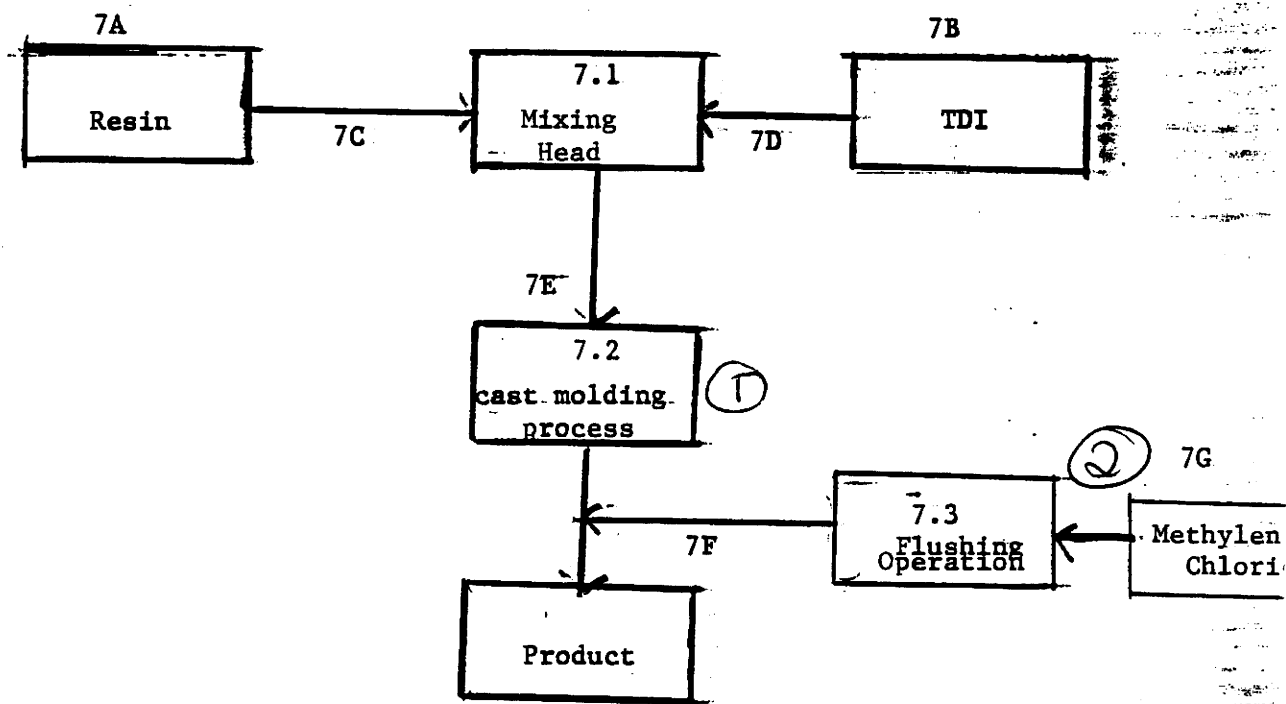
For questions 7.04-7.06, provide a separate response for each process block flow diagram provided in questions 7.01, 7.02, and 7.03. Identify the process type from which the information is extracted.

PART A MANUFACTURING AND PROCESSING PROCESS TYPE DESCRIPTION

7.01 In accordance with the instructions, provide a process block flow diagram showing the major (greatest volume) process type involving the listed substance.

CBI

☐ Process type Urethane Foam Operation (Low Pressure)



☐ Mark (X) this box if you attach a continuation sheet.

- ✓ 9.05 Describe the various work area(s) shown in question 9.04 that encompass workers who may potentially come in contact with or be exposed to the listed substance. Add any additional areas not shown in the process block flow diagram in question 7.01 or 7.02. Photocopy this question and complete it separately for each process type.

CBI

☐ Process type Urethane Foam Operation (High Pressure)

| <u>Work Area ID</u> | <u>Description of Work Areas and Worker Activities</u> |
|---------------------|--|
| 1 | <u>impingent mixer-workers monitor flow of raw material to mixer</u> |
| 2 | <u>cast molding-workers spray and clean molds</u> |
| 3 | <u></u> |
| 4 | <u></u> |
| 5 | <u></u> |
| 6 | <u></u> |
| 7 | <u></u> |
| 8 | <u></u> |
| 9 | <u></u> |
| 10 | <u></u> |

☐ Mark (X) this box if you attach a continuation sheet.

9.05 Describe the various work area(s) shown in question 9.04 that encompass workers who may potentially come in contact with or be exposed to the listed substance. Add any additional areas not shown in the process block flow diagram in question 7.01 or 7.02. Photocopy this question and complete it separately for each process type.

CBI

☐ Process type Urethane Foam-Operation (Low Pressure)

Work Area ID

Description of Work Areas and Worker Activities

| | |
|----|--|
| 1 | <u>cast mold - workers spray and clean molds</u> |
| 2 | <u>flushing operation- workers activate flushing</u> |
| 3 | <u>system according to need.</u> |
| 4 | |
| 5 | |
| 6 | |
| 7 | |
| 8 | |
| 9 | |
| 10 | |

☐ Mark (X) this box if you attach a continuation sheet.

9.06 Complete the following table for each work area identified in question 9.05, and for each labor category at your facility that encompasses workers who may potentially come in contact with or be exposed to the listed substance. Photocopy this question and complete it separately for each process type and work area.

☐ Process type Urethane Foam Operation (High Pressure)

Work area 1

| Labor Category | Number of Workers Exposed | Mode of Exposure (e.g., direct skin contact) | Physical State of Listed Substance ¹ | Average Length of Exposure Per Day ² | Number of Days per Year Exposed |
|----------------|---------------------------|--|---|---|---------------------------------|
| ABCD | 10 | inhalation direct skin | GU OL | E | 200 |
| | | | | | |
| | | | | | |
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¹Use the following codes to designate the physical state of the listed substance at the point of exposure:

| | |
|--|---|
| GC = Gas (condensable at ambient temperature and pressure) | SY = Sludge or slurry |
| GU = Gas (uncondensable at ambient temperature and pressure; includes fumes, vapors, etc.) | AL = Aqueous liquid |
| SO = Solid | OL = Organic liquid |
| | IL = Immiscible liquid (specify phases, e.g., 90% water, 10% toluene) |

²Use the following codes to designate average length of exposure per day:

| | |
|---|---|
| A = 15 minutes or less | D = Greater than 2 hours, but not exceeding 4 hours |
| B = Greater than 15 minutes, but not exceeding 1 hour | E = Greater than 4 hours, but not exceeding 8 hours |
| C = Greater than one hour, but not exceeding 2 hours | F = Greater than 8 hours |

☐ Mark (X) this box if you attach a continuation sheet.

9.06 Complete the following table for each work area identified in question 9.05, and for each labor category at your facility that encompasses workers who may potentially come in contact with or be exposed to the listed substance. Photocopy this question and complete it separately for each process type and work area.

CBI

☐ Process type ...Jack Urethane Foam Operation (Low Pressure)

Work area 2

| Labor Category | Number of Workers Exposed | Mode of Exposure (e.g., direct skin contact) | Physical State of Listed Substance ¹ | Average Length of Exposure Per Day ² | Number of Days per Year Exposed |
|----------------|---------------------------|--|---|---|---------------------------------|
| ABCD | 10 | inhalation direct skin | OL GU | E | 200 |
| | | | | | |
| | | | | | |
| | | | | | |
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| | | | | | |

¹Use the following codes to designate the physical state of the listed substance at the point of exposure:

| | |
|--|---|
| GC = Gas (condensable at ambient temperature and pressure) | SY = Sludge or slurry |
| GU = Gas (uncondensable at ambient temperature and pressure; includes fumes, vapors, etc.) | AL = Aqueous liquid |
| SO = Solid | OL = Organic liquid |
| | IL = Immiscible liquid (specify phases, e.g., 90% water, 10% toluene) |

²Use the following codes to designate average length of exposure per day:

| | |
|---|---|
| A = 15 minutes or less | D = Greater than 2 hours, but not exceeding 4 hours |
| B = Greater than 15 minutes, but not exceeding 1 hour | E = Greater than 4 hours, but not exceeding 8 hours |
| C = Greater than one hour, but not exceeding 2 hours | F = Greater than 8 hours |

☐ Mark (X) this box if you attach a continuation sheet.

9.07 For each labor category represented in question 9.06, indicate the 8-hour Time Weighted Average (TWA) exposure levels and the 15-minute peak exposure levels. Photocopy this question and complete it separately for each process type and work area.

CBI

☐ Process type Urethane Foam Operation (High and Low Pressure)

Work area land2

| Labor Category | 8-hour TWA Exposure Level (ppm, mg/m ³ , other-specify) | 15-Minute Peak Exposure Level (ppm, mg/m ³ , other-specify) |
|----------------|---|---|
| ABCD | 0.005 ppm (ACGIH) 0.02 OSHA PEL | NA |
| | | |
| | | |
| | | |
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| | | |

☐ Mark (X) this box if you attach a continuation sheet.

PART B WORK PLACE MONITORING PROGRAM

9.08 If you monitor worker exposure to the listed substance, complete the following table.

CBI

☐

| Sample/Test | Work Area ID | Testing Frequency (per year) | Number of Samples (per test) | Who Samples ¹ | Analyzed In-House (Y/N) | Number of Years Records Maintained |
|-------------------------|------------------|------------------------------|------------------------------|--------------------------|-------------------------|------------------------------------|
| Personal breathing zone | NA | NA | NA | NA | NA | NA |
| General work area (air) | <i>Irregular</i> | <i>Irregular</i> | UK | B | N | UK |
| Wipe samples | NA | NA | NA | NA | NA | NA |
| Adhesive patches | NA | NA | NA | NA | NA | NA |
| Blood samples | NA | NA | NA | NA | NA | NA |
| Urine samples | NA | NA | NA | NA | NA | NA |
| Respiratory samples | UK | UK | UK | UK | UK | UK |
| Allergy tests | NA | NA | NA | NA | NA | NA |
| Other (specify) | | | | | | |
| NA | | | | | | |
| Other (specify) | | | | | | |
| | | | | | | |
| Other (specify) | | | | | | |
| | | | | | | |

¹Use the following codes to designate who takes the monitoring samples:

A = Plant industrial hygienist

B = Insurance carrier

C = OSHA consultant

D = Other (specify) _____

☐ Mark (X) this box if you attach a continuation sheet.

9.09 For each sample type identified in question 9.08, describe the type of sampling and analytical methodology used for each type of sample.

☐ Sample Type Sampling and Analytical Methodology

General Work Area Model G pump w/midget impinger

| | |
|--|--|
| | |
| | |
| | |
| | |

9.10 If you conduct personal and/or ambient air monitoring for the listed substance, specify the following information for each equipment type used.

CBI

☐ Equipment Type¹ NA Detection Limit² Manufacturer Averaging Time (hr) Model Number

| | | | | |
|--|--|--|--|--|
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |

¹Use the following codes to designate personal air monitoring equipment types:

- A = Passive dosimeter
- B = Detector tube
- C = Charcoal filtration tube with pump
- D = Other (specify) _____

Use the following codes to designate ambient air monitoring equipment types:

- E = Stationary monitors located within work area
- F = Stationary monitors located within facility
- G = Stationary monitors located at plant boundary
- H = Mobile monitoring equipment (specify) _____
- I = Other (specify) _____

²Use the following codes to designate detection limit units:

- A = ppm
- B = Fibers/cubic centimeter (f/cc)
- C = Micrograms/cubic meter (μm^3)

☐ Mark (X) this box if you attach a continuation sheet.

✓ 9.11 If you conduct routine medical tests for monitoring the health effects of exposure to the listed substance, specify the type and frequency of the tests.

CBI

☐

Test Description

Frequency
(weekly, monthly, yearly, etc.)

In the past we have conducted routine
medical tests.

Periodically

☐ Mark (X) this box if you attach a continuation sheet.

PART C ENGINEERING CONTROLS

✓ 9.12 Describe the engineering controls that you use to reduce or eliminate worker exposure to the listed substance. Photocopy this question and complete it separately for each process type and work area.

CBI

[] Process type Urethane Foam Operation (High and Low Pressure)

Work area ALL THE SAME 1 and 2

| <u>Engineering Controls</u> | <u>Used (Y/N)</u> | <u>Year Installed</u> | <u>Upgraded (Y/N)</u> | <u>Year Upgraded</u> |
|--|-----------------------|---------------------------|---------------------------|--------------------------|
| Ventilation: | | | | |
| Local exhaust | <u>Y</u> | <u>1985</u> | <u>N</u> | <u>NA</u> |
| General dilution | <u>Y</u> | <u>1985</u> | <u>N</u> | <u>NA</u> |
| Other (specify) | | | | |
| <u>NA</u> | | | | |
| Vessel emission controls | | | | |
| Mechanical loading or packaging equipment | | | | |
| Other (specify) | | | | |
| <u>NA</u> | | | | |

[] Mark (X) this box if you attach a continuation sheet.

- ✓ 9.13 Describe all equipment or process modifications you have made within the 3 years prior to the reporting year that have resulted in a reduction of worker exposure to the listed substance. For each equipment or process modification described, state the percentage reduction in exposure that resulted. Photocopy this question and complete it separately for each process type and work area.

CBI

~~NA~~

☐ Process type _____

Work area _____

| <u>Equipment or Process Modification</u> | <u>Reduction in Worker Exposure Per Year (%)</u> |
|--|--|
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |

☐ Mark (X) this box if you attach a continuation sheet.

PART D PERSONAL PROTECTIVE AND SAFETY EQUIPMENT

- ✓ 9.14 Describe the personal protective and safety equipment that your workers wear or use in each work area in order to reduce or eliminate their exposure to the listed substance. Photocopy this question and complete it separately for each process type and work area.

CBI

[] Process type ALL THE SAME FOR HIGH + LOW and WORK areas
Urethane Foam Operation (High and Low Pressure)

Work area 1 and 2

| <u>Equipment Types</u> | <u>Wear or Use (Y/N)</u> |
|---------------------------|--------------------------|
| Respirators | <u>voluntary</u> |
| Safety goggles/glasses | <u>Y</u> |
| Face shields | <u>N</u> |
| Coveralls | <u>N</u> |
| Bib aprons | <u>Y</u> |
| Chemical-resistant gloves | <u>N</u> |
| Other (specify) | |
| Safety Shoes | <u>Y</u> |
| _____ | _____ |
| _____ | _____ |

[] Mark (X) this box if you attach a continuation sheet.

9.15 If workers use respirators when working with the listed substance, specify for each process type, the work areas where the respirators are used, the type of respirators used, the average usage, whether or not the respirators were fit tested, and the type and frequency of the fit tests. Photocopy this question and complete it separately for each process type.

CBI

N/A

☐ Process type _____

| <u>Work Area</u> | <u>Respirator Type</u> | <u>Average Usage¹</u> | <u>Fit Tested (Y/N)</u> | <u>Type of Fit Test²</u> | <u>Frequency of Fit Tests (per year)</u> |
|------------------|------------------------|----------------------------------|-------------------------|-------------------------------------|--|
| _____ | _____ | _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ | _____ | _____ |

¹Use the following codes to designate average usage:

A = Daily

B = Weekly

C = Monthly

D = Once a year

E = Other (specify) _____

²Use the following codes to designate the type of fit test:

QL = Qualitative

QT = Quantitative

☐ Mark (X) this box if you attach a continuation sheet.

PART E WORK PRACTICES

- ✓ 9.19 Describe all of the work practices and administrative controls used to reduce or eliminate worker exposure to the listed substance (e.g., restrict entrance only to authorized workers, mark areas with warning signs, insure worker detection and monitoring practices, provide worker training programs, etc.). Photocopy this question and complete it separately for each process type and work area.

CBI

☐

Process type Urethane Foam Operation (High and Low Pressure)

same for both ~~high~~

Work area 1 and 2

high + low

same

restrict entrance only to authorized workers, provide worker training

programs, maintain MSDS's for employee use, discuss TDI on a yearly

basis in Right-to-Know training classes.

- ✓ 9.20 Indicate (X) how often you perform each housekeeping task used to clean up routine leaks or spills of the listed substance. Photocopy this question and complete it separately for each process type and work area.

Process type Urethane Foam Operation

Same for high/low and work areas

Work area 1 and 2

| Housekeeping Tasks | Less Than Once Per Day | 1-2 Times Per Day | 3-4 Times Per Day | More Than 4 Times Per Day |
|--------------------------|---------------------------|----------------------|----------------------|------------------------------|
| Sweeping | | X | | |
| Vacuuming | NA | NA | NA | NA |
| Water flushing of floors | NA | NA | NA | NA |
| Other (specify) | | | | |
| NA | | | | |

☐ Mark (X) this box if you attach a continuation sheet.

- ✓ 9.21 Do you have a written medical action plan for responding to routine or emergency exposure to the listed substance?

Routine exposure

☒ Yes 1

No 2

Emergency exposure

☒ Yes 1

No 2

If yes, where are copies of the plan maintained?

Routine exposure: Within Material Safety Data Sheet Books within the departments and on file with the Safety Coordinator

Emergency exposure: Within Material Safety Data Sheet Books within the departments and on file with the Safety Coordinator

- ✓ 9.22 Do you have a written leak and spill cleanup plan that addresses the listed substance? Circle the appropriate response.

☒ Yes 1

No 2

If yes, where are copies of the plan maintained? ~~within department and on file with~~
Safety Coordinator

Has this plan been coordinated with state or local government response organizations? Circle the appropriate response.

☒ Yes 1

No 2

- 9.23 Who is responsible for monitoring worker safety at your facility? Circle the appropriate response.

☒ Plant safety specialist 1

☒ Insurance carrier 2

OSHA consultant 3

Other (specify) _____ 4

☐ Mark (X) this box if you attach a continuation sheet.

SECTION 10 ENVIRONMENTAL RELEASE

General Instructions:

Complete Part E (questions 10.23-10.35) for each non-routine release involving the listed substance that occurred during the reporting year. Report on all releases that are equal to or greater than the listed substance's reportable quantity value, RQ, unless the release is federally permitted as defined in 42 U.S.C. 9601, or is specifically excluded under the definition of release as defined in 40 CFR 302.3(22). Reportable quantities are codified in 40 CFR Part 302. If the listed substance is not a hazardous substance under the Comprehensive Environmental Response, Compensation, and Liability Act of 1980 (CERCLA) and, thus, does not have an RQ, then report releases that exceed 2,270 kg. If such a substance however, is designated as a CERCLA hazardous substance, then report those releases that are equal to or greater than the RQ. The facility may have answered these questions or similar questions under the Agency's Accidental Release Information Program and may already have this information readily available. Assign a number to each release and use this number throughout this part to identify the release. Releases over more than a 24-hour period are not single releases, i.e., the release of a chemical substance equal to or greater than an RQ must be reported as a separate release for each 24-hour period the release exceeds the RQ.

For questions 10.25-10.35, answer the questions for each release identified in question 10.23. Photocopy these questions and complete them separately for each release.

PART A GENERAL INFORMATION

✓ 10.01 Where is your facility located? Circle all appropriate responses.

CBI

- ☐ Industrial area 1
- ☒ Urban area 2
- Residential area 3
- Agricultural area 4
- Rural area 5
- Adjacent to a park or a recreational area 6
- Within 1 mile of a navigable waterway 7
- Within 1 mile of a school, university, hospital, or nursing home facility 8
- Within 1 mile of a non-navigable waterway 9
- Other (specify) _____ 10
-

☐ Mark (X) this box if you attach a continuation sheet.

- ✓ 10.02 Specify the exact location of your facility (from central point where process unit is located) in terms of latitude and longitude or Universal Transverse Mercader (UTM) coordinates.

Latitude 42 ° 52 ' 40 "

Longitude 18 ° 0 ' 0 "

UTM coordinates Zone UK , Northing UK , Easting UK

- ✓ 10.03 If you monitor meteorological conditions in the vicinity of your facility, provide the following information.

Average annual precipitation inches/year

Predominant wind direction

- ✓ 10.04 Indicate the depth to groundwater below your facility.

Depth to groundwater meters

- ✓ 10.05 For each on-site activity listed, indicate (Y/N/NA) all routine releases of the listed substance to the environment. (Refer to the instructions for a definition of CBI Y, N, and NA.)

☐

On-Site Activity

Environmental Release

| | <u>Air</u> | <u>Water</u> | <u>Land</u> |
|-----------------------------|------------|--------------|-------------|
| Manufacturing | NA | NA | NA |
| Importing | NA | NA | NA |
| Processing | N | NA | NA |
| Otherwise used | NA | NA | NA |
| Product or residual storage | N | N | N |
| Disposal | NA | NA | NA |
| Transport | NA | NA | NA |

☐ Mark (X) this box if you attach a continuation sheet.

✓

10.06 Provide the following information for the listed substance and specify the level of precision for each item. (Refer to the instructions for further explanation and an example.)

CBI

☐

| | | |
|---|----------------------|-----------------------|
| Quantity discharged to the air | <u>trace amounts</u> | kg/yr ± <u> </u> % |
| Quantity discharged in wastewaters | <u>0.0</u> | kg/yr ± <u> </u> % |
| Quantity managed as other waste in on-site treatment, storage, or disposal units | <u>0.0</u> | kg/yr ± <u> </u> % |
| Quantity managed as other waste in off-site treatment, storage, or disposal units | <u>3,629.</u> | kg/yr ± <u>OK</u> % |

☐ Mark (X) this box if you attach a continuation sheet.

10.08 Describe the control technologies used to minimize release of the listed substance for each process stream containing the listed substance as identified in your process block or residual treatment block flow diagram(s). Photocopy this question and complete it separately for each process type.

✓ CBI

☐ Process type Urethane Foam Operation (High Pressure)

| <u>Stream ID Code</u> | <u>Control Technology</u> | <u>Percent Efficiency</u> |
|-----------------------|---------------------------|---------------------------|
| | | |
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| | | |

We do not use any control technologies.
Waste emitted in final product form.

☐ Mark (X) this box if you attach a continuation sheet.

10.08 Describe the control technologies used to minimize release of the listed substance for each process stream containing the listed substance as identified in your process block or residual treatment block flow diagram(s). Photocopy this question and complete it separately for each process type.

CBI

☐ Process type Urethane Foam Operation (Low Pressure)

| <u>Stream ID Code</u> | <u>Control Technology</u> | <u>Percent Efficiency</u> |
|-----------------------|---------------------------|---------------------------|
| | N/A | |
| | | |
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We do not use any control technologies
Mixing head has flush vented barrels.

☐ Mark (X) this box if you attach a continuation sheet.

PART B RELEASE TO AIR

- ✓ 10.09 Point Source Emissions -- Identify each emission point source containing the listed substance in terms of a Stream ID Code as identified in your process block or residual treatment block flow diagram(s), and provide a description of each point source. Do not include raw material and product storage vents, or fugitive emission sources (e.g., equipment leaks). Photocopy this question and complete it separately for each process type.

Process type Urethane Foam Operation (High Pressure)

Point Source
ID Code

Description of Emission Point Source

7C

stack

7D

stack

7E

stack

7F

stack

7G

stack

☐ Mark (X) this box if you attach a continuation sheet.

PART B RELEASE TO AIR

- ✓ 10.09 Point Source Emissions -- Identify each emission point source containing the listed substance in terms of a Stream ID Code as identified in your process block or residual treatment block flow diagram(s), and provide a description of each point source. Do not include raw material and product storage vents, or fugitive emission sources (e.g., equipment leaks). Photocopy this question and complete it separately for each process type.

CBI

☐

Process type Urethane Foam Operation (Low Pressure)

Point Source
ID Code

Description of Emission Point Source

7D

stack

7E

stack

7F

stack

7G

stack

7H

stack

7I

stack

7J

stack

☐ Mark (X) this box if you attach a continuation sheet.

10.11 Stack Parameters -- Identify the stack parameters for each Point Source ID Code identified in question 10.09 by completing the following table.

CBI

☐

| Point Source ID Code | Stack Height(m) | Stack Inner Diameter (at outlet) (m) | Exhaust Temperature (°C) | Emission Exit Velocity (m/sec) | High Pressure | | |
|-------------------------------|--------------------|--|--------------------------------|---|------------------------------------|-----------------------------------|---------------------------|
| | | | | | Building Height(m) ¹ | Building Width(m) ² | Vent Type ³ |
| 7C | 1.83 | .60 | 21 | 3.05 | 6.1 | 15.25 | V |
| 7D | " | " | " | " | " | " | " |
| 7E | " | " | " | " | " | " | " |
| 7F | " | " | " | " | " | " | " |
| 7G | " | " | " | " | " | " | " |
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¹Height of attached or adjacent building

²Width of attached or adjacent building

³Use the following codes to designate vent type:

H = Horizontal

V = Vertical

☐ Mark (X) this box if you attach a continuation sheet.

10.11 Stack Parameters -- Identify the stack parameters for each Point Source ID Code identified in question 10.09 by completing the following table.

CBI

LOW PRESSURE

☐

| Point Source ID Code | Stack Height(m) | Stack Inner Diameter (at outlet) (m) | Exhaust Temperature (°C) | Emission Exit Velocity (m/sec) | Building Height(m) ¹ | Building Width(m) ² | Vent Type ³ |
|-------------------------------|--------------------|--|--------------------------------|---|------------------------------------|-----------------------------------|---------------------------|
| 7D | 1.83 | .60 | 21 | 5.67 | 61 | 15.24 | V |
| 7E | " | " | " | " | " | " | " |
| 7F | " | " | " | " | " | " | " |
| 7G | " | " | " | " | " | " | " |
| 7H | " | " | " | " | " | " | " |
| 7I | " | " | " | " | " | " | " |
| 7J | " | " | " | " | " | " | " |
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¹Height of attached or adjacent building

²Width of attached or adjacent building

³Use the following codes to designate vent type:

H = Horizontal

V = Vertical

☐ Mark (X) this box if you attach a continuation sheet.

✓ 10.12 If the listed substance is emitted in particulate form, indicate the particle size distribution for each Point Source ID Code identified in question 10.09. Photocopy this question and complete it separately for each emission point source.

CBI

~~NA~~

☐

Point source ID code

Size Range (microns)

Mass Fraction (% ± % precision)

< 1

≥ 1 to < 10

≥ 10 to < 30

≥ 30 to < 50

≥ 50 to < 100

≥ 100 to < 500

≥ 500

Total = 100%

☐ Mark (X) this box if you attach a continuation sheet.

PART C FUGITIVE EMISSIONS

- ✓ 10.13 Equipment Leaks -- Complete the following table by providing the number of equipment types listed which are exposed to the listed substance and which are in service according to the specified weight percent of the listed substance passing through the component. Do this for each process type identified in your process block or residual treatment block flow diagram(s). Do not include equipment types that are not exposed to the listed substance. If this is a batch or intermittently operated process, give an overall percentage of time per year that the process type is exposed to the listed substance. Photocopy this question and complete it separately for each process type.

CBI

☐ Process type
 Percentage of time per year that the listed substance is exposed to this process type %

| Equipment Type | Number of Components in Service by Weight Percent of Listed Substance in Process Stream | | | | | Greater than 99% |
|---|---|-------|--------|--------|--------|------------------|
| | Less than 5% | 5-10% | 11-25% | 26-75% | 76-99% | |
| Pump seals ¹ | | | | | | |
| Packed | | | | | | |
| Mechanical | | | | | | |
| Double mechanical ² | | | | | | |
| Compressor seals ¹ | | | | | | |
| Flanges | | | | | | |
| Valves | | | | | | |
| Gas ³ | | | | | | |
| Liquid | | | | | | |
| Pressure relief devices ⁴ (Gas or vapor only) | | | | | | |
| Sample connections | | | | | | |
| Gas | | | | | | |
| Liquid | | | | | | |
| Open-ended lines ⁵ (e.g., purge, vent) | | | | | | |
| Gas | | | | | | |
| Liquid | | | | | | |

¹List the number of pump and compressor seals, rather than the number of pumps or compressors

10.13 continued on next page

☐ Mark (X) this box if you attach a continuation sheet.

10.13 (continued)

²If double mechanical seals are operated with the barrier (B) fluid at a pressure greater than the pump stuffing box pressure and/or equipped with a sensor (S) that will detect failure of the seal system, the barrier fluid system, or both, indicate with a "B" and/or an "S", respectively

³Conditions existing in the valve during normal operation

⁴Report all pressure relief devices in service, including those equipped with control devices

⁵Lines closed during normal operation that would be used during maintenance operations

- ✓ 10.14 Pressure Relief Devices with Controls -- Complete the following table for those pressure relief devices identified in 10.13 to indicate which pressure relief devices in service are controlled. If a pressure relief device is not controlled, enter "None" under column c.

CBI

[]

N/A

| a. Number of Pressure Relief Devices | b. Percent Chemical in Vessel ¹ | c. Control Device | d. Estimated Control Efficiency ² |
|--|--|----------------------|--|
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |

¹Refer to the table in question 10.13 and record the percent range given under the heading entitled "Number of Components in Service by Weight Percent of Listed Substance" (e.g., <5%, 5-10%, 11-25%, etc.)

²The EPA assigns a control efficiency of 100 percent for equipment leaks controlled with rupture discs under normal operating conditions. The EPA assigns a control efficiency of 98 percent for emissions routed to a flare under normal operating conditions

[] Mark (X) this box if you attach a continuation sheet.

✓ 10.15 Equipment Leak Detection -- If a formal leak detection and repair program is in place, complete the following table regarding those leak detection and repair procedures. Photocopy this question and complete it separately for each process type.

CBI

N/A

☐ Process type

| Equipment Type | Leak Detection Concentration (ppm or mg/m ³) | Detection Device ¹ | Frequency of Leak Detection (per year) | Repairs Initiated (days after detection) | Repairs Completed (days after initiated) |
|---|--|----------------------------------|---|---|---|
| | Measured at Inches from Source | | | | |
| Pump seals | | | | | |
| Packed | | | | | |
| Mechanical | | | | | |
| Double mechanical | | | | | |
| Compressor seals | | | | | |
| Flanges | | | | | |
| Valves | | | | | |
| Gas | | | | | |
| Liquid | | | | | |
| Pressure relief devices (gas or vapor only) | | | | | |
| Sample connections | | | | | |
| Gas | | | | | |
| Liquid | | | | | |
| Open-ended lines | | | | | |
| Gas | | | | | |
| Liquid | | | | | |

¹Use the following codes to designate detection device:

POVA = Portable organic vapor analyzer

FPM = Fixed point monitoring

0 = Other (specify) _____

☐ Mark (X) this box if you attach a continuation sheet.

10.16 Raw Material, Intermediate and Product Storage Emissions - - Complete the following table by providing the information on each liquid raw material, intermediate, and product storage vessel containing the listed substance as identified in your process block or residual treatment block flow diagram(s).

CBI

☐

| Vessel Type ¹ | Floating Roof Seals ² | Composition of Stored Materials ³ | Throughput (liters per year) | Vessel Filling Rate (gpm) | Vessel Filling Duration (min) | Vessel Inner Diameter (m) | Vessel Height (m) | Vessel Volume (l) | Operating Vessel Emission Controls ⁴ | Design Flow Rate ⁵ | Vent Diameter (cm) | Control Efficiency (%) | Basis for Estimate ⁶ |
|--------------------------|----------------------------------|--|------------------------------|---------------------------|-------------------------------|---------------------------|-------------------|-------------------|---|-------------------------------|--------------------|------------------------|---------------------------------|
| | | | | | | | | | | | | | |
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Material is in sealed 55 gallon drums

¹Use the following codes to designate vessel type:

- F = Fixed roof
- CIF = Contact internal floating roof
- NCIF = Noncontact internal floating roof
- EFR = External floating roof
- P = Pressure vessel (indicate pressure rating)
- H = Horizontal
- U = Underground

²Use the following codes to designate floating roof seals:

- MS1 = Mechanical shoe, primary
- MS2 = Shoe-mounted secondary
- MS2R = Rim-mounted, secondary
- LM1 = Liquid-mounted resilient filled seal, primary
- LM2 = Rim-mounted shield
- LMW = Weather shield
- VM1 = Vapor mounted resilient filled seal, primary
- VM2 = Rim-mounted secondary
- VMW = Weather shield

³Indicate weight percent of the listed substance. Include the total volatile organic content in parenthesis

⁴Other than floating roofs

⁵Gas/vapor flow rate the emission control device was designed to handle (specify flow rate units)

⁶Use the following codes to designate basis for estimate of control efficiency:

- C = Calculations
- S = Sampling

PART E NON-ROUTINE RELEASES

✓ 10.23 Indicate the date and time when the release occurred and when the release ceased or was stopped. If there were more than six releases, attach a continuation sheet and list all releases.

~~NA~~

| <u>Release</u> | <u>Date Started</u> | <u>Time (am/pm)</u> | <u>Date Stopped</u> | <u>Time (am/pm)</u> |
|----------------|---------------------|---------------------|---------------------|---------------------|
| <u>1</u> | _____ | _____ | _____ | _____ |
| <u>2</u> | _____ | _____ | _____ | _____ |
| <u>3</u> | _____ | _____ | _____ | _____ |
| <u>4</u> | _____ | _____ | _____ | _____ |
| <u>5</u> | _____ | _____ | _____ | _____ |
| <u>6</u> | _____ | _____ | _____ | _____ |

✓ 10.24 Specify the weather conditions at the time of each release.

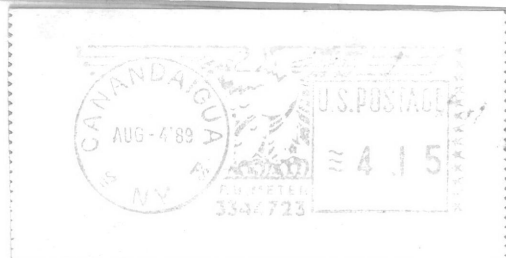
| <u>Release</u> | <u>Wind Speed (km/hr)</u> | <u>Wind Direction</u> | <u>Humidity (%)</u> | <u>Temperature (°C)</u> | <u>Precipitation (Y/N)</u> |
|----------------|---------------------------|-----------------------|---------------------|-------------------------|----------------------------|
| <u>1</u> | _____ | _____ | _____ | _____ | _____ |
| <u>2</u> | _____ | _____ | _____ | _____ | _____ |
| <u>3</u> | _____ | _____ | _____ | _____ | _____ |
| <u>4</u> | _____ | _____ | _____ | _____ | _____ |
| <u>5</u> | _____ | _____ | _____ | _____ | _____ |
| <u>6</u> | _____ | _____ | _____ | _____ | _____ |

☐ Mark (X) this box if you attach a continuation sheet.

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